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2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State
03-25-2002 90130 011 ****61.25

DOCUMENT # N96000003481

1. Entity Name

MELBOURNE PERFORMING ARTS GUILD, INC.

Principal Place of Business	Mailing Address
P.O. BOX 2688 MELBOURNE FL 32902	P.O. BOX 2688 MELBOURNE FL 32902

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
HENEGAR CENTER	625 E. New Haven St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MELBOURNE	City & State: FLORIDA
Zip: 32901 Country: USA	Zip: Country:

4. FEI Number: 59-3388614 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ADCOCK, LEE 201 HARBOR CITY PKWY D120 INDIAN HARBOR BEACH FL 32937	Name: M. Lee Adcock Street Address (P.O. Box Number is Not Acceptable): 700 E. Strawbridge Ave/ e City: Melbourne FL Zip Code: 32901

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE: Lee Adcock, Treasurer DATE: 3/11/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP PERRY, SHARON 2500 FOREST RUN DRIVE MELBOURNE FL 32935	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President DP Mae Piszczek 588 W. Pine Rd. Melbourne, Fl. 32904	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S POMERANZ, LIN 170 AFORIA LANE INDIALANTIC FL 32903	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President VDP Marian Newman 2408 Misty Way Melbourne, Fl. 32935	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ADCOCK, LEE 201 HARBOR CITY PKWY INDIAN HARBOR BEACH FL 32937	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Lee Adcock 700 Strawbridge Ave. Melbourne, Fl. 32901	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD NEWMAN, MARIAN 2408 MISTY WAY LANE MELBOURNE FL 32935	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President VPD Carol Highsmith 560 Lake Ashley Cir. Melbourne, Fl. 32904	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MILLER, CAROL 1727 NICHOLAS DRIVE MELBOURNE FL 32935	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SSecretary Betty Neylon 716 Lincoln Ave. Melbourne, Fl. 32901	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lee Adcock Lee Adcock Treasurer 3/11/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #