

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2002 8:00 am
Secretary of State

02-13-2002 90182 027 ****61.25

DOCUMENT # N96000006257

1. Entity Name

BOCA RATON MUSIC STUDY CLUB, INC.

Principal Place of Business

**1312 LAKE DRIVE
 DELRAY BEACH FL 33444**

Mailing Address

**1909 SW 13TH TERR.
 BOYNTON BEACH FL 33426-5835**

2. Principal Place of Business

115 SW 14th ST.

3. Mailing Address

115 SW 14th ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boynton Beach

City & State

FL Boynton Beach

Zip

Country

33426-4641

Zip

Country

33426

4. FEI Number

65-0452701

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**BAKER, DOROTHY P
 1909 SW 13TH TERR.
 BOYNTON BEACH FL 33426-5835**

7. Name and Address of New Registered Agent

Name **DOROTHY P. BAKER**

Street Address (P.O. Box Number is Not Acceptable)

115 SW 14th ST

Boynton Beach

City

FL

Zip Code

33426 - 4641

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

Dorothy P. Baker

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE **D** ☐ Delete
 NAME **SCHUEHLER, MARY**
 STREET ADDRESS **828 FORSYTH ST**
 CITY-ST-ZIP **BOCA RATON FL 33489**

TITLE **VD** ☒ Delete
 NAME **SCHUEHLER, MARY**
 STREET ADDRESS **10420 LAKE VISTA CIRCLE**
 CITY-ST-ZIP **BOCA RATON FL 33498**

TITLE **PD** ☐ Delete
 NAME **WALKER, HELEN**
 STREET ADDRESS **3581 LAKEVIEW DR**
 CITY-ST-ZIP **DELRAY BEACH FL 33445**

TITLE **SD** ☒ Delete
 NAME **ABBOTT, RITA**
 STREET ADDRESS **9 ROYAL PALM WAY #9-305**
 CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE **D** ☐ Delete
 NAME **TUTTLE, CONSTANCE**
 STREET ADDRESS **1312 LAKE DRIVE**
 CITY-ST-ZIP **DELRAY BEACH FL 33444**

TITLE **TD** ☐ Delete
 NAME **BAKER, DOROTHY**
 STREET ADDRESS **115 SW 14TH ST**
 CITY-ST-ZIP **BOYNTON BEACH FL 33426**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
 NAME **33487**

TITLE ☐ Change ☒ Addition
 NAME **MARILYN SURETTE**
 STREET ADDRESS **10420 LAKE VISTA CIRCLE**
 CITY-ST-ZIP **BOCA RATON FL 33498**

TITLE ☐ Change ☐ Addition
 NAME **---**
 STREET ADDRESS **---**
 CITY-ST-ZIP **---**

TITLE ☐ Change ☐ Addition
 NAME **---**
 STREET ADDRESS **---**
 CITY-ST-ZIP **---**

TITLE ☐ Change ☐ Addition
 NAME **---**
 STREET ADDRESS **---**
 CITY-ST-ZIP **---**

TITLE ☐ Change ☐ Addition
 NAME **---**
 STREET ADDRESS **---**
 CITY-ST-ZIP **---**

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:

SIGNATURE REQUIRED

1-28-02

561-738-5082

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Deputy Phone #

CR2E037 (9/01)