

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 13, 2006 08:00 AM  
Secretary of State

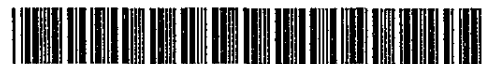
DOCUMENT # N96000006257

1. Entity Name  
BOCA RATON MUSIC STUDY CLUB, INC.



Principal Place of Business  
115 SW 14TH ST  
BOYNTON BEACH, FL 33426-4641

Mailing Address  
115 SW 14TH ST  
BOYNTON BEACH, FL 33426



01052006 No Chg-NP CR2E037 (11/05)

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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  
115 SW 14TH ST  
BOYNTON BEACH, FL 33426

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent Signature required when reinstating)

DATE

Filing Fee is \$61.25  
Due by May 1, 2006

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SURETTE, MARILYN 10420 LAKE VISTA CIRCLE BOCA RATON, FL 33498
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WALKER, HELEN 3581 LAKEVIEW DR DELRAY BEACH, FL 33445
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TUTTLE, CONSTANCE 1312 LAKE DRIVE DELRAY BEACH, FL 33444
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BAKER, DOROTHY 115 SW 14TH ST BOYNTON BEACH, FL 33426
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WEIR, JOAN MRS 1775 PARK TREE PLACE DELRAY BEACH, FL 33445
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

1100000386170  
01/18/06-80048-009 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

*Dorothy P. Baker* TREAS  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-6-06 (561) 738-5082

Date

Daytime Phone #