

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000000754

1. Entity Name

TARPON SPRINGS CHORAL BOOSTERS, INC.

Principal Place of Business

1411 S GULF RD
TARPON SPRINGS FL 34689
US

Mailing Address

1411 S GULF RD
TARPON SPRINGS FL 34689
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3608459

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

WARWICK, CHRISTINE
1411 S GULF RD
TARPON SPRINGS FL 34689

Name

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

City

FL

Zip Code

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME WARWICK, CHRISTINE
STREET ADDRESS 1607 LONESOME PINE LN
CITY-ST-ZIP TARPON SPRINGS FL 34689 ☐ Delete

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

TITLE VD
NAME EATON, DARLENE
STREET ADDRESS 3764 CARMICHAEL CT
CITY-ST-ZIP PALM HARBOR FL 34684 ☒ Delete

TITLE YD
NAME DENA ECONOMOS
STREET ADDRESS 301 FOREST HEIGHTS DR.
CITY-ST-ZIP TARPON SPRINGS, FL 34689 ☒ Change ☐ Addition

TITLE TSD
NAME HUGHES, CYNTHIA
STREET ADDRESS 2095 E ORANGEHILL AVE
CITY-ST-ZIP PALM HARBOR FL 34685 ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Delete

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

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:

Christine Warwick

4/30/01 (727) 938-6822



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)