

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 27, 2003 8:00 am**  
**Secretary of State**

01-27-2003 90368 044 \*\*\*\*61.25

**DOCUMENT # N98000002061**

1. Entity Name  
**WCY MUSIC BOOSTERS, INC.**



Principal Place of Business

**901 NW 129 AVE. #711  
PEMBROKE PINES FL 33028**

Mailing Address

**901 NW 129 AVE. #711  
PEMBROKE PINES FL 33028**

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 **NOT APPLICABLE**

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

**PERTIERRA, SUSAN  
11311 NW 15TH PL  
PEMBROKE PINES FL 33026**

Name **Pamela J. Harry**  
Street Address (P.O. Box Number is Not Acceptable)  
**1520 N.W. 122 Avenue**  
City **Pembroke Pines FL** Zip Code **33026**

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 **Pamela J. Harry**

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

(NOTE: Registered Agent signature required when reinstating)

**1-23-03**

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DS** ☒ Delete  
NAME **MIRTA, GILBERT**  
STREET ADDRESS **2110 NW 118TH AVE**  
CITY-ST-ZIP **HOLLYWOOD FL 33026**

TITLE **DS** ☒ Change ☐ Addition  
NAME **Westerfield, Susan**  
STREET ADDRESS **12969 N.W. 18th Manor**  
CITY-ST-ZIP **Pembroke Pines, FL 33028**

TITLE **DVP** ☐ Delete  
NAME **GRIMSLAND, DEBBIE**  
STREET ADDRESS **11931 NW 22ND ST**  
CITY-ST-ZIP **HOLLYWOOD FL 33026**

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

TITLE **DT** ☒ Delete  
NAME **PERTIERRA, SUSAN**  
STREET ADDRESS **11311 N W 15TH PL**  
CITY-ST-ZIP **PEMBROKE PINES FL 33026**

TITLE **DT** ☒ Change ☐ Addition  
NAME **Engel, Lisa**  
STREET ADDRESS **1112 Hiatus Road**  
CITY-ST-ZIP **Pembroke Pines, FL 33026**

TITLE **DP** ☒ Delete  
NAME **CRUM, DEBBIE**  
STREET ADDRESS **11910 NW 22ND ST**  
CITY-ST-ZIP **HOLLYWOOD FL 33026**

TITLE **DP** ☒ Change ☐ Addition  
NAME **Harry, Pamela**  
STREET ADDRESS **1520 N.W. 122 Avenue**  
CITY-ST-ZIP **Pembroke Pines, FL 33026**

TITLE **DVP** ☒ Delete  
NAME **HARRY, PAM**  
STREET ADDRESS **1520 NW 122ND AVE**  
CITY-ST-ZIP **HOLLYWOOD FL 33026**

TITLE **DVP** ☒ Change ☐ Addition  
NAME **Mulcahy, Mary**  
STREET ADDRESS **10931 N.W. 18th Street**  
CITY-ST-ZIP **Pembroke Pines, FL 33026**

TITLE ☐ Delete  
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: **Pamela J. Harry**

**1-23-03**

**954/431-1807**

CR2E037 (10/02)