

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003907

FILED
May 24, 2007
Secretary of State

Entity Name: PASCO COUNTY, FLORIDA CHAPTER OF THE SOCIETY FOR THE PRESERVATION AND ENCOURAGEMENT OF BARBERSHOP QUARTET SINGING IN AMERICA, INC.

Current Principal Place of Business:

8350 CESSNA DRIVE
NEW PORT RICHEY, FL 34654 US

New Principal Place of Business:

Current Mailing Address:

8350 CESSNA DRIVE
NEW PORT RICHEY, FL 34654 US

New Mailing Address:

FEI Number: 59-1993809 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

EKBLAD, CARL A
8350 CESSNA DRIVE
NEW PORT RICHEY, FL 34654 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DCS () Delete
Name: EKBLAD, CARL A
Address: 8350 CESSNA DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: DCP () Delete
Name: NORTON, G W
Address: 5548 FESTIVO DR
City-St-Zip: HOLIDAY, FL 346902229

Title: DCV () Delete
Name: PARZIK, RAYMOND
Address: 5646 ANDREA DRIVE
City-St-Zip: HOLIDAY, FL 34690

Title: DCT () Delete
Name: HAULER, CHARLES
Address: 12975 CORONADO DRIVE
City-St-Zip: SPRING HILL, FL 346095850

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DCV (X) Change () Addition
Name: HURLEY, DANIEL
Address: 11833 SPENDRIFT LOOP
City-St-Zip: HUDSON, FL 34667

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARL A. EKBLAD

DCS

05/24/2007

Electronic Signature of Signing Officer or Director

Date