

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90393 003 ****70.00

0024791

DOCUMENT # N99000006266

1. Entity Name

THE AUDIO PLAYGROUND SYNTHESIZER MUSEUM, INC.

Principal Place of Business

Mailing Address

699 CLAY ST
 WINTER PARK FL 32789

699 CLAY ST
 WINTER PARK FL 32789

00044263



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3552118

Applied For

Not Applicable

Zip

Country

Zip

Country

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

RIVERS, JOSEPH
699 CLAY ST
WINTER PARK FL 32789

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
PD
RIVERS, JOSEPH ☐ Delete
699 CLAY STREET
WINTER PARK FL 32789

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
SD
ORLOWSKI, PETER ☒ Delete
7554 SUNTREE CIRLCE, APT. #107
ORLANDO FL 32807

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
Martha Brown ☐ Change ☒ Addition
6138 Burkley Court Title: Secretary Director
Orlando, FL 32809 SD

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D
RIVERS, YOLANDA ☐ Delete
9085 NW 52ND TERRACE
MIAMI FL 33178

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D
MORAZ, PATRICK ☐ Delete
5286 N. ORANGE BLOSSOM TRAIL, #205
ORLANDO FL 32810

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D
WOOD, ERIC ☒ Delete
1445 CHILEAN LANE
WINTER PARK FL 32792

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
Denise Moore ☐ Change ☒ Addition
6138 Burkley Court Title: Director
Orl., FL 32809

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D
RIVERS, MICHELE ☐ Delete
699 CLAY STREET
WINTER PARK FL 32789

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: *Michele Rivers* **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-01

407 628-2119

Date

Daytime Phone #

CR2E037 (10/00)