2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 09, 2000 8:00 am
Secretary of State
07-19-2000 90022 040 ****61.25

DOCUMENT # N99000007162

1. Entity Name

THE HARMONY WINDS GOSPEL SINGERS INC.

(R)

Principal Place of Business	Mailing Address
3510 22ND AVE. TAMPA FL 33605	3510 22ND AVE. TAMPA FL 33605

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4207 Orient RD Suite, Apt. #, etc.	4207 Orient RD. Suite, Apt. #, etc.
City & State: TAMPA, Fla	City & State: TAMPA, Fl.
Zip: 33610 Country: U.S.A.	Zip: 33610 Country: USA.

4. FEI Number: 59-3612317 ☐ 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
PITTMAN, TONY 4207 ORIENT RD. TAMPA FL 33610	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
After September 13, 2000 min. will be $236.25

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	P PITTMAN, TONY 4207 22ND AVE. TAMPA FL 33605 (D)	☐ Delete	B.M. (Business manager) Felicia Pittman 4207 Orient RD. TAMPA, Fl. 33610 (T)	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V PITTMAN, T.C. 3510 22ND AVE. TAMPA FL 33605 (D)	☐ Delete	B.M. (Booking manager) Ethel Pittman 3501 22nd. Ave. TAMPA, Fl. 33605 (D)	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HAM, DEBRA 2302 21ST AVE. TAMPA FL 33605 (T)	☐ Delete	B.K. (Bookkeeper) Johnnie Capheart 4706 85th. Dr. Progress Village, Fl. 33619 (T)	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (5/00)

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: SIGNATURE REQUIRED Tony Pittman 7-7-00 813-621-2294
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #