

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 am
Secretary of State

01-30-2002 90082 005 ***150.00

DOCUMENT # P01000023576

1. Entity Name

MICHELLE WIDENER'S PERFORMING ARTS CENTER INC.

Principal Place of Business

**12794 FOREST HILL BLVD
 WELLINGTON FL 33414**

Mailing Address

**12794 FOREST HILL BLVD
 WELLINGTON FL 33414**

00013040



2. Principal Place of Business

12785 West Forest Hill Blvd

3. Mailing Address

12785 West Forest Hill Blvd

Suite, Apt. #, etc.

#8E

Suite, Apt. #, etc.

#8E

DO NOT WRITE IN THIS SPACE

City & State

Wellington FL

City & State

Wellington FL

4. FEI Number

65-1079952

Applied For

Not Applicable

Zip

33414

Country

US

Zip

33414

Country

US

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK INC.

941 FOURTH STREET #200

MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name

Michelle Widener

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

999 Country Club Drive

City

North Palm Beach

FL

Zip Code

33408

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

mwidener

14 Jan 02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **WIDENER, MICHELLE**
 CITY-ST-ZIP **12794 FOREST HILL BLVD
 WELLINGTON FL 33414**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME **P/D**
 STREET ADDRESS **Michelle Widener**
 CITY-ST-ZIP **12785 W. Forest Hill Blvd #8E
 wellington FL 33414**

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

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

mwidener

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14 Jan 02

Date

5617931122

Daytime Phone #

CR2E034 (9/01)