

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 31, 2003 8:00 am
Secretary of State

07-31-2003 90073 047 ***150.00

0110790 AV

DOCUMENT # P02000064715

1. Entity Name
DRAMA KIDS OF SARASOTA, INC.



Principal Place of Business
**6246 BUCKINGHAM STREET
SARASOTA FL 34238**

Mailing Address
**6246 BUCKINGHAM STREET
SARASOTA FL 34238**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

30-0088415

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**SNYDER, LISA K
6246 BUCKINGHAM STREET
SARASOTA FL 34238**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00

**After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **SNYDER, LISA K**
STREET ADDRESS **6246 BUCKINGHAM STREET**
CITY-ST-ZIP **SARASOTA FL 34238**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 607, 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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LISA K. SNYDER 7/25/03 (941) 922-8121

Date

Daytime Phone #

CR2E034 (4/03)



Attachment #
86135068
PO2000064715

6246 Buckingham Street
Sarasota, FL 34238
Phone: (941) 922-8121
Fax: (941) 922-8721
Email: DramaKids@comcast.net

7/25/03

TO: Florida Dept. of State

FR: Drama Kids of Sarasota, Inc.
Lisa K. Snyder

Please find my completed report along with the original filing fee of 150.00

I understand that since I did not receive prior notice (and I just started my business and was unaware of this fee) that no late fee will apply.

Thank you.

Lisa K. Snyder
Director

-- Drama-Kids-of-Sarasota, Inc. --