

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000077600

1. Entity Name

THE MUSIC STAND OF PORT CHARLOTTE, INC.

FILED
Apr 02, 2001 8:00 am
Secretary of State

04-02-2001 90281 032 ***150.00

Principal Place of Business

2000 TAMiami TRAIL
SUITE 210
PORT CHARLOTTE FL 33948
US

Mailing Address

2000 TAMiami TRAIL
SUITE 210
PORT CHARLOTTE FL 33948
US

00030569



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1900 TAMiami TR
Suite, Apt. #, etc.
UNIT 139

3. Mailing Address

1900 TAMiami TR
Suite, Apt. #, etc.
UNIT 139

City & State

PORT CHARLOTTE, FL

City & State

PORT CHARLOTTE, FL

4. FEI Number

65-0396842

Applied For

Not Applicable

Zip

33948

Country

CHARLOTTE

Zip

33948

Country

CHARLOTTE

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BATSEL, MCKINLEY, ITERSAGEN & GUNDERSON PA
18401 MURDOCK CIRCLE
PORT CHARLOTTE FL 33948

7. Name and Address of New Registered Agent

Name: David Edwards
Street Address (P.O. Box Number is Not Acceptable): 1061 FERGUS LANE
City: Punta Gorda FL Zip Code: 33983

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

David Edwards

(NOTE: Registered Agent signature required when reinstating)

DATE

3-16-01

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, 2001 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: D
NAME: EDWARDS, DAVID
STREET ADDRESS: 1061 FERGUS LANE
CITY-ST-ZIP: PUNTA GORDA FL 33983 ☐ Delete

TITLE: D
NAME: EDWARDS, NANCY
STREET ADDRESS: 1061 FERGUS LANE
CITY-ST-ZIP: PUNTA GORDA FL 33983 ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

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CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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:

David Edwards
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-16-01 629-3479

CR2E034 (10/00)