

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000007939

1. Entity Name

SUMMIT ORCHESTRAL SOCIETY, INC.

FILED

Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90010 034 ***150.00

Principal Place of Business

Mailing Address

1860 CLEARBROOKE DRIVE
CLEARWATER FL 34620

12 CLEARWATER MALL
STE. 232
CLEARWATER FL 34624

643417



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

10365 Ulmerton Rd

3. Mailing Address

2945C East Bay Drive

Suite, Apt. #, etc. #62

Suite, Apt. #, etc. #124

City & State

Largo, FL

City & State

Largo, FL

4. FEI Number

59-3291884

Applied For

Not Applicable

Zip

33771

Country

U.S.A.

Zip

33771

Country

U.S.A.

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

DUFOR, ROBERT
2108 CENTERVIEW CT S
CLEARWATER FL 33759

Name

Shelia Hutek

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

2344 Surrey Lane

Clearwater

City

FL

Zip Code
33763

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

Shelia Hutek

(Shelia Hutek, registered Agent 4/18/01)

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME PRINGLE, WILLIAM H
STREET ADDRESS 1860 CLEARBROOKE DRIVE
CITY-ST-ZIP CLEARWATER FL 33760

TITLE P ☒ Change ☐ Addition
NAME Pringle, William H.
STREET ADDRESS 10365 Ulmerton Road, #62
CITY-ST-ZIP Largo, FL 33771

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William H. Pringle, Pres

04/18/01 (727) 501-0095

Date

Daytime Phone #

CR2E034 (10/00)