## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P96000013043 (0)

ERIKSEN FLUTE & MUSIC THERAPY, INC.

APPROVED AND

97 AUG 13 AM 11; 41

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address						I TOBERDON AND TORING DIVINE SOUTH BOTHLY ODIGE THEOD THEN BURN BLAND HIN 1881
9110 12TH AVE. NW BRADENTON FL 34209		9110 12TH AVE. NW Bradenton Fl 34209				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified   3a. Date of Last Report
						02/08/1996
2. Principal P	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				(05-0654) 8 7   Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22		27				Fee Required
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be
23		Zip Country				Trust Fund Contribution
Zip	Country			ntry		
24	9. Name and Address of Current	29 Registered Agent	30			Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
	<u>. Y</u>	gom		81	Name	70.
ERIKSEN, JULIE 9110 12TH AVE. NW						Add as (D.O. Da Alamba is Alat Assessable)
	DENTON FL 34209			82	Street A	Address (P.O. Box Number is Not Acceptable)
יווט	DENTON 1 E 34209		•	83		
			ŀ	84	City	FL 85 Zip Code
dd Daniel	La Alana de Captiona COZ DEOG	and CO7 1EO9 Florida Platut	00 db0 0		nomod	· —   .
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
12.	OFFICERS AND		13.	Age	iii signatoro	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		DELETE	1.1 70	ILE.		Change Addition
NAME	Julie Eriksen, pr	resident	1.2 NA	ME	i	9000022703699
STREET ADDRESS			1.3 STREET ADDRESS		ADDRESS	-08/18/9701138012
CITY-ST-ZIP	Bradenton, Florida	34209	1.4 C)	TY-S	T-ZIP	****165.00 ****165.00
TITLE	Eric Eriksen, vice f	Detete	21 11	TLE		☐ Change ☐ Addition
NAME		TEMORITY"	2.2 N/	AME		
STREET ADDRESS	9110 12 AVE NW	211700	2.3 \$1	REET	ADDRESS	
CITY-ST-ZIP	Bradenton, Florida	31407		•	ST-ZIP	01
TITLE		☐ DELETE	3.1 TIT			Change Addition
NAME			3.2 NA			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		DELETE	3.4. U 4.1 Ti		ST-ZIP	Change Addition
TITLE NAME		La occet	4. 2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			4.4 CI			
TITLE		DELETE	5.1 70			Change Addition
NAME			5.2 N/	AME	1	1
STREET ADDRESS			5.3 \$1	REET	ADDRESS	
CITY-ST-ZIP			5.4 CI	<u> 14 - S</u>	1-ZIP	K18/12
TITLE		DELET <b>e</b>	6.1 Tr	TLE		☐ Change ☐ Addition
NAME			6.2 N/	AME	+	
STREET ADDRESS			6.3 \$1	REET	ADDRESS	
CITY-ST-ZIP	The state of the s	with this filles was and and	6.4 CI			Noted in Contine 110 07/2Vi) Elevida Statutas I further applifut that the
14 I do herel	by certify that the information supplied	with this filing does not qual	fy for the	exe	mption st	stated in Section 119.07(3)(i). Florida Statutes, I further certify that the

Information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CACHER LIGHT DECLARANTENA