

# 2001 UNIFORM BUSINESS REPORT (UBR)

4/2

FILED

May 23, 2001 8:00 am  
Secretary of State

04-24-2001 90051 008 \*\*\*150.00

DOCUMENT # P97000022006

1. Entity Name

RAY MORGAN PIANO COMPANY

Principal Place of Business

11575 U.S. HIGHWAY 1  
NORTH PALM BEACH FL 33408

Mailing Address

11575 U.S. HIGHWAY 1  
NORTH PALM BEACH FL 33408

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0736939

Applied For

Not Applicable

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

TURNER, RICK CPA PA  
14255 US HIGHWAY 1  
JUNO BEACH FL 33408

Name

MIRTA MORGAN

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

11575 US HIGHWAY 1

N. PALM BEACH

City

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 MIRTA MORGAN

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

(NOTE: Registered Agent signature required when reinstating)

DATE

5/2/01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete

NAME  
MORGAN, RAYMOND  
STREET ADDRESS  
11575 US HIGHWAY 1  
CITY - ST - ZIP  
NORTH PALM BEACH FL 33408

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete

NAME  
MORGAN, MIRTA  
STREET ADDRESS  
11575 US HIGHWAY 1  
CITY - ST - ZIP  
NORTH PALM BEACH FL 33408

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: MIRTA MORGAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/2/01

Date

561-694-0800

Daytime Phone #

CR2E034 (10/00)