

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 04, 2001 8:00 am**  
**Secretary of State**

04-04-2001 90499 012 \*\*\*158.75

0312888

**DOCUMENT # P98000065443**

1. Entity Name  
**SPIRITSONG PRODUCTIONS, INC.**

Principal Place of Business  
**1418 SW 25TH WAY  
DEERFIELD BEACH FL 33442**

Mailing Address  
**P.O. BOX 5204  
DEERFIELD BEACH FL 33442  
US**

2. Principal Place of Business  
**1236 SW 48TH Terr**

Suite, Apt. #, etc.

3. Mailing Address  
  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State  
**Deerfield Beach FL**

Zip  
**33442**

Country

City & State

4. FEI Number  
**65-0853055**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ANDREWS, JILL L  
1418 SW 25TH WAY  
DEERFIELD BEACH FL 33442**

7. Name and Address of New Registered Agent

Name  
  
Street Address (P.O. Box Number is Not Acceptable)  
**1236 SW 48TH Terr**  
City **Deerfield Beach** **FL** Zip Code **33442**

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 **1-30-01**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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	<b>D</b>	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>ANDREWS, JILL L</b>		NAME		
STREET ADDRESS	<b>1418 SW 25TH WAY</b>		STREET ADDRESS	<b>1236 SW 48TH Terr</b>	
CITY-ST-ZIP	<b>DEERFIELD BEACH FL 33442</b>		CITY-ST-ZIP	<b>Deerfield Beach, FL 33442</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>JAWORSKI, DEANNA</b>		NAME		
STREET ADDRESS	<b>1418 SW 25TH WAY</b>		STREET ADDRESS	<b>1236 SW 48TH Terr</b>	
CITY-ST-ZIP	<b>DEERFIELD BEACH FL 33442</b>		CITY-ST-ZIP	<b>Deerfield Beach, FL 33442</b>	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: **1-30-01**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1-30-01** **954-418-0399**  
Date Daytime Phone #

CR2E034 (10/00)