

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996 *5-1-96*



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortnam
Secretary of State
DIVISION OF CORPORATIONS *(6077)*

DOCUMENT # **371143** (9)

1. Corporation Name
MARSHALL GRANT ORCHESTRAS, INC.



Principal Place of Business: **1750 NORTH FLORIDA MANGO ROAD, SUITE 103 WEST PALM BEACH FL 33409-5214**
Mailing Address: **C/O ROBERT S. LEVY 1655 PALM BEACH LAKES BLVD. SUITE 502 WEST PALM BEACH FL 33401 US**

3. Date Incorporated or Qualified: **10/13/1970** Date of Last Report: **04/28/1995**
4. FEI Number: **59-1313727** Applied For: Not Applicable:
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 [] 22 [] 23 [] 24 []
2a. Mailing Address: 26 [] 27 [] 28 [] 29 []
City & State: 22 [] 27 [] 28 []
Zip: 24 [] 25 [] 29 [] 30 []

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ROBERT S. LEVY
SUITE 502, THE FORUM
1655 PALM BEACH LAKES BLVD
WEST PALM BEACH FL 33401**

81 Name: []
82 Street Address (P.O. Box Number is Not Acceptable): []
83 []
84 City: [] 85 Zip Code: **FL** []

11. Pursuant to the provisions of Sections 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 (if different from above)

Signature of New Registered Agent (signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	GRANT, DOLORES	
STREET ADDRESS	135 GREGORY PL	
CITY-ST-ZIP	WEST PALM BEACH FL 33405	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	BAKER, Marlene	
13 STREET ADDRESS	1655 Palm Beach Lakes Boulevard	
14 CITY-ST-ZIP	West Palm Beach, FL 33401	
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Dolores Grant* Dolores Grant, President 407/ 582-6708
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date: April 30, 1996
Office Phone #

CR2E034 (12/95)