FILE NOW: FILING FEE IS $61.25

FILED
May 16 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 710590 (1)

1. Corporation Name
THE IMPERIAL SYMPHONY ORCHESTRA, INC.

Principal Place of Business	Mailing Address
1037 S. FLORIDA AVE. #125 LAKELAND FL 33803 US	P. O. BOX 2623 LAKELAND FL 33806-2623 US

3. Date Incorporated or Qualified: 03/24/1966
3a. Date of Last Report: 05/20/1996

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

4. FEI Number: 59-6177414 ☐ 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

9. Name and Address of Current Registered Agent

MASON, BETH
1918 SEMINOLE TRAIL
LAKELAND FL 33803

10. Name and Address of New Registered Agent

81 Name: J. LENORA KING
82 Street Address (P.O. Box Number is Not Acceptable): 1037 S. FLORIDA AVE. STE. 125
83:
84 City: LAKELAND FL 85 Zip Code: 33803

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: J. Lenora King J. LENORA KING AS EXECUTIVE DIRECTOR OF ISO DATE: 4/30/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MAXWELL, ANITA 1037 S. FLORIDA AVENUE, #125 LAKELAND FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP TARVER, COLETTE 5255 LAKE-IN-THE-WOODS BLVD. LAKELAND FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	CANDACE STEDEN 1037 S. FLORIDA AVE STE. 125 LAKELAND, FL 33803	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WEAVER, MURRAY H 1037 S. FLORIDA AVE., #125 LAKELAND FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	T/D BARBARA DAVIS 1037 S. FLORIDA AVE STE 125 Lakeland, FL 33803	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT LLOBBS, JULIUS 1037 S. FLORIDA AVENUE, #125 LAKELAND FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	P/D HOBBS	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HERNANDEZ, ANDY 2510 S. FLORIDA AVENUE LAKELAND FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	V/D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MASON, BETH 1918 SEMINOLE TRAIL LAKELAND FL	☒ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	V JACK HOLLIS 1037 S. FLORIDA AVE STE 125 LAKELAND, FL 33803	☐ Change ☒ Addition

CR2E037 (9/96)

14. I do 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Candace Steden CANDACE STEDEN 4-30-97 941-688-3743
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0052626