## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 73

1997

735895

(5)

BACH FESTIVAL OF CENTRAL FLORIDA, INC.

2,1011							
Principal Place	e of Business	Mailing Address				T 1901ST 100000 11195 BITDL 48150 10501 BISH BIGH BIGH BIGH BIGH BISH BISH BISH BISH BISH BISH BISH BIS	
1052 CLEARVIEW AVE P.O. BOX 2764 LAKELAND FL 33806-2764		1052 CLEARVIEW AVE. P.O. BOX 2764 LAKELAND FL 33806-2764					
US		US				3. Date Incorporated or Qualified 05/24/1976 3a. Date of Last Report 05/01/1996	
2. Principal Pl 21	lace of Business	2a. Mailing Address 26				4. FEI Number Applied For 51-0204813 Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	25 29 30		<del></del> ,	untry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No	
	9. Name and Address of Currer	nt Registered Agent			·	10. Name and Address of New Registered Agent	
		•		81	Name	į d	
	PATSY M			82	82 Street Address (P.O. Box Number is Not Acceptable)		
1052 CLEARVIEW AVE. LAKELAND FL 33801				83			
				84	City	FL 85 Zip Code	
office or re	to the provisions of Sections 617.050 registered agent, or both, in the State rm familiar with, and accept the oblig	of Florida. Such change was	authorize	ed by	y the corpo	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered	
SIGNATURE _	Signature, typed or printed name of registered age	ent and title if applicable. (NO	TF: Registere	d Age	ent signature r	e required when reinstating) DATE	
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DV	DELETE	1.† TI	ITLE		☐ Change ☐ Addition	
NAME	GOULD-MOHR, RUTH		1.2 N	IAME			
STREET ADDRESS	323 LA SERENA		1.3 S	TREET	ADDRESS		
CITY-ST-ZIP	WINTER HAVEN FL	T DELETE		1.4 CITY - ST		Chan District	
TITLE	D D	☐ DELETE		2.1 TITLE		Change Addition	
NAME			2.2 N				
STREET ADDRESS			1	2.3 STREET ADDRESS  2. 4 CITY - ST - ZIP			
CITY-ST-ZIP TITLE	WINTER HAVEN FL	DELETE	2. 4 C		ST-ZIP	Change Addition	
NAME	D Otten, David	- verre	3.2 N				
STREET ADDRESS	A CAR LUBBBBBLIGHT LAND			3.3 STREET ADDRESS			
CITY-ST-ZIP	1 SIZMI ALIM PI				ST-ZIP		
TITLE	DT	DELETE	4.1 T			Change Addition	
NAME	O'NEAL, PATSY M		4.21	NAME			
STREET ADDRESS	1052 CLEARVIEW AVE.		4.3 S	TREET	T ADDRESS		
CITY-ST-ZIP	LAKELAND FL		4.4 C	HTY-5	ST-ZIP		
TITLE	P	☐ DELETE	5.1 T	ITLE		Change Addition	
NAME	HASSE, MARIE			IAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP	HAINES CITY FL	DELĒTE			SI - ZIP	Change Addition	
TITLE	DS DARTHOLOMEN PREMINA P	<del></del>	6.1 T			E CHOINGE LA MARION	
NAME DEDECT ADDRESS	BARTHOLOMEW, BRENDA B			NAME			
STREET ADDRESS	741 CANBERRA RD., S.E. WINTER HAVEN FL				T ADDRESS		
14. I do heret	by cartify that the information eupplic	ed with this filing does not qua	lify for the	OVE	ST-ZIP emption st	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the	
informatio	on Indicated on this annual report or I	supplemental annual report is or the receiver or trustee emoor	true and wered to	accu	urate and	d that my signature shall have the same legal effect as if made under oath; that report as required by Chapter 617, Florida Statutes; and that my name	

GNATURE DATA DAN 1021 MOINEAD 4 30 97 (941) 682-85