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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N14350

1. Corporation Name

SARASOTA CONCERT ASSOCIATION, INC.

Principal Place of Business

4346 BRYANT'S POND LN
 SARASOTA FL 34233
 US

Mailing Address

% MARTHA LEITER
 4346 BRYANT'S POND LN
 SARASOTA FL 34233
 US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

04/14/1986

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-2850861

Applied For

Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

24 Zip Country

28 Zip Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

LEITER, MARTHA
 4346 BRYANT'S POND LN
 SARASOTA FL 34233

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VP DELETE
 NAME DACHO DACHOFF
 STREET ADDRESS 6647 AVE D
 CITY-ST-ZIP SARASOTA FL 34231

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

TITLE VP DELETE
 NAME LEITHER, MARTHA
 STREET ADDRESS 4346 BRYANTS POND LANE
 CITY-ST-ZIP SARASOTA FL 34233

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE S DELETE
 NAME QUIMBY, ROBERT F
 STREET ADDRESS 1363 GLENDALE CIRCLE E
 CITY-ST-ZIP SARASOTA FL 34232

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE T DELETE
 NAME PETERS, GEORGE J.
 STREET ADDRESS 541 PUTTING GREEN LANE
 CITY-ST-ZIP LONGBOAT KEY FL 34228

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

TITLE D DELETE
 NAME SMITH, MARGARET
 STREET ADDRESS 4027 COUNTRY VIEW DRIVE
 CITY-ST-ZIP SARASOTA FL 34233

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE D DELETE
 NAME BAAR, HERMAN
 STREET ADDRESS 835 S OSPREY AVE # 114
 CITY-ST-ZIP SARASOTA FL 34236

6.1 TITLE Change Addition
 6.2 NAME BAAR, HERMAN
 6.3 STREET ADDRESS 101 S GULFSTREAM APT 8-D
 6.4 CITY-ST-ZIP SARASOTA FL, 34236

14. 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 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, with all other like empowered.

SIGNATURE: *George J. Peters*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/99 (944) 383-8233

Date

Daytime Phone #

CR2E037 (1/98)