


FILE NOW: FILING FEE IS \$61.25

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Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90136 031 ***150.00

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N14767

1. Corporation Name
GUILD FOR INTERNATIONAL PIANO COMPETITIONS, INCORPORATED

Principal Place of Business 313 CRANESNEST WAY WEST PALM BEACH FL 33401	Mailing Address P.O. Box 6845 313 CRANESNEST WAY WEST PALM BEACH FL 33401 33405-6845
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21. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 05/12/1986
22. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 59-2670372
23. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
25. Country	29. Country	

9. Name and Address of Current Registered Agent

FINLEY, CHANDLER
1645 PALM BEACH LAKES #300
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent

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

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 _____ DATE _____
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	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRYAN, JOHN	1.2 NAME	
STREET ADDRESS	313 CRANESNEST WAY 3639 PASSEO NAVARRA	1.3 STREET ADDRESS	
CITY-ST-ZIP	W PALM BCH FL	1.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARCENTALES, EDUARDO	2.2 NAME	
STREET ADDRESS	209 AVILA RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BCH FL	2.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DANIELS, ALVA G	3.2 NAME	
STREET ADDRESS	44 COCOANUT ROW	3.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BCH FL	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NICHOLS, MARION	4.2 NAME	
STREET ADDRESS	4090 GEM LAKE DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	GLEN RIDGE FL 33406-3254	4.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRAVIS, MERCEDES	5.2 NAME	
STREET ADDRESS	219 CHILEAN AVE #B	5.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH FL 33480	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ISAACSON, MARSHALL OWEN	6.2 NAME	
STREET ADDRESS	20755 EAGLE CREEK COURT	6.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33498	6.4 CITY-ST-ZIP	

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: John Bryan, President Date: 3-11-99 Daytime Phone #: (561) 833-8817

CR2E037 (11/98)