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Apr 08 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 # **N15927** **(9)**

1. Corporation Name
**THE ASOLO CENTER FOR THE PERFORMING ARTS, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| 5555 N TAMIAMI TRAIL<br>SARASOTA FL 34243 | 5555 N TAMIAMI TRAIL<br>SARASOTA FL 34243-2141 |

3. Date Incorporated or Qualified: 07/17/1986
3a. Date of Last Report: 06/21/1996

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: 59-2717909 ☐ 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**

GERDES, DONNA M
5555 N. TAMIAMI TRAIL
SARASOTA FL 34243

**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's signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|---|
| TITLE | PD | ☒ DELETE | 1.1 TITLE | PD | ☐ Change ☒ Addition |
| NAME | ROBERTS, DON | | 1.2 NAME | Stanley Kane | |
| STREET ADDRESS | 5555 N TAMIAMI TRAIL | | 1.3 STREET ADDRESS | 5555 North Tamiami Trail | |
| CITY-ST-ZIP | SARASOTA FL 34243 | | 1.4 CITY-ST-ZIP | Sarasota, FL 34243 | |
| TITLE | VD | ☒ DELETE | 2.1 TITLE | VD | ☐ Change ☒ Addition |
| NAME | WHALEY, PRESTAN DR. | | 2.2 NAME | Ray Palmer | |
| STREET ADDRESS | 5555 N TAMIAMI TRAIL | | 2.3 STREET ADDRESS | 5555 North Tamiami Trail | |
| CITY-ST-ZIP | SARASOTA FL 34243 | | 2.4 CITY-ST-ZIP | Sarasota, FL 34243 | |
| TITLE | TD | ☒ DELETE | 3.1 TITLE | TD | ☐ Change ☒ Addition |
| NAME | PENDER, MICHAEL R JR. | | 3.2 NAME | Richard S. Olson | |
| STREET ADDRESS | 1605 MAIN ST., SUITE 1100 | | 3.3 STREET ADDRESS | 5555 North Tamiami Trail | |
| CITY-ST-ZIP | SARASOTA FL | | 3.4 CITY-ST-ZIP | Sarasota, FL 34243 | |
| TITLE | SE | ☐ DELETE | 4.1 TITLE | | ☒ Change ☐ Addition |
| NAME | DIGALORIDE, LINDA | | 4.2 NAME | DiGabriele, Linda | |
| STREET ADDRESS | 5555 N TAMIAMI TRAIL | | 4.3 STREET ADDRESS | (Spelling correction) | |
| CITY-ST-ZIP | SARASOTA FL 34243 | | 4.4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 6.4 CITY-ST-ZIP | | |

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.

Acting Secretary