

FILE NOW: FILING FEE IS \$61.25

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Jan 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N18265 (1) 1. Corporation Name FLORIDA ASSOCIATION OF LOCAL ARTS AGENCIES, INC.					
Principal Place of Business 2725 JUDGE FRANK JAMIESON WAY BLDG. C. 2ND FLOOR SUITE C202 VIERA FL 32940 US			Mailing Address 2725 JUDGE FRANK JAMIESON WAY BLDG. C. 2ND FLOOR SUITE C202 VIERA FL 32940 US		
2. Principal Place of Business 21 2725 JUDGE FRANK JAMIESON WAY Suite, Apt. #, etc. 22 SUITE C202 City & State 23 Zip 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 SUITE C202 City & State 28 Zip 29		Country 30	
9. Name and Address of Current Registered Agent SPRING, MICHAEL 111 NW FIRST ST 625 MIAMI FL 33128					
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					
TITLE	VPD	☐ DELETE			
NAME	BECHT, MARY				
STREET ADDRESS	100 S ANDREWS AVE				
CITY-ST-ZIP	FT LAUDERDALE FL				
TITLE	PD	☐ DELETE			
NAME	CASWELL, PATRICIA				
STREET ADDRESS	1351 FRUITVILLE RD				
CITY-ST-ZIP	SARASOTA FL				
TITLE	DT	☐ DELETE			
NAME	KEEBLE, ARTHUR				
STREET ADDRESS	725 E KENNEDY ST				
CITY-ST-ZIP	TAMPA FL				
TITLE	SD	☐ DELETE			
NAME	COWDEN, DONNA				
STREET ADDRESS	123 W INDIANA AVE				
CITY-ST-ZIP	DELAND FL				
TITLE	D	☐ DELETE			
NAME	BURKE, KAY E				
STREET ADDRESS	2725 JUDGE FRANK JAMIESON WAY				
CITY-ST-ZIP	VIERA FL				
TITLE		☐ DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE	☐ Change ☐ Addition				
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP					
2.1 TITLE	☐ Change ☐ Addition				
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE	☐ Change ☐ Addition				
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE	☐ Change ☐ Addition				
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
5.1 TITLE	☒ Change ☐ Addition				
5.2 NAME	D				
5.3 STREET ADDRESS	BURK, KAY E.				
5.4 CITY-ST-ZIP	2725 JUDGE FRANK JAMIESON WAY C202 VIERA, FL 32940				
6.1 TITLE	☐ Change ☐ Addition				
6.2 NAME					
6.3 STREET ADDRESS					
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.					
SIGNATURE: <u>Kay E. Burk</u> <u>01-06-98 (407)690-6817</u>					



CR2E037 (10/97)