

FILE NOW: FILING FEE IS \$61.25

FILED
May 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N41239 (7)

1. Corporation Name
ARTARGET, INC.

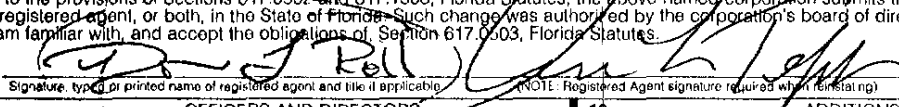
Principal Place of Business PO BOX 49733 SARASOTA FL 34230 US	Mailing Address PO BOX 49733 SARASOTA FL 34230-6733 US
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/14/1990		3a. Date of Last Report 03/26/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 65-0236857		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24 Country		29 Country		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent LEE, H. GREG 2014 FOURTH ST SARASOTA FL 34237				10. Name and Address of New Registered Agent			
81 Name ARTHUR L. TEPPER				82 Street Address (P.O. Box Number is Not Acceptable) 1680 FRUIT VINE ROAD			
83 Suite, Apt. #, etc. SUITE # 102				84 City SARASOTA			
				85 Zip Code FL 34236			

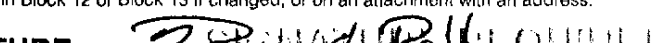
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE  DATE **2/5/97**

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	☒ DELETE		1.1 TITLE	VPO	☐ Change ☒ Addition	
NAME	HAMEL, LOUISE			1.2 NAME	KIM YOUNG-SHEPHERD		
STREET ADDRESS	520 OHIO PLACE			1.3 STREET ADDRESS	481 S. LINE AVE		
CITY-ST-ZIP	SARASOTA FL			1.4 CITY-ST-ZIP	SARASOTA FL 34237	☐ Change ☒ Addition	
TITLE	T	☐ DELETE		2.1 TITLE	D	☐ Change ☒ Addition	
NAME	AMOS, HAROLD			2.2 NAME	MARK ORMOND		
STREET ADDRESS	7248 ANTIGUA PLACE			2.3 STREET ADDRESS	5401 BAY SHORE ROAD		
CITY-ST-ZIP	SARASOTA FL			2.4 CITY-ST-ZIP	SARASOTA FL 34243	☐ Change ☒ Addition	
TITLE	PD	☐ DELETE		3.1 TITLE	D	☐ Change ☒ Addition	
NAME	SUMNER, PAMELA			3.2 NAME	GILL HOFFMAN		
STREET ADDRESS	555 S GULFSTREAM AV 903			3.3 STREET ADDRESS	715 HAWK AVE		
CITY-ST-ZIP	SARASOTA FL			3.4 CITY-ST-ZIP	SARASOTA FL 34232	☐ Change ☒ Addition	
TITLE	VPD	☐ DELETE		4.1 TITLE	D	☐ Change ☒ Addition	
NAME	ROLL, DONALD			4.2 NAME	PAUL YOUNGBLOOD		
STREET ADDRESS	811 S SCHOOL AVE			4.3 STREET ADDRESS	PO BOX 20904		
CITY-ST-ZIP	SARASOTA FL			4.4 CITY-ST-ZIP	SARASOTA FL 34276	☐ Change ☐ Addition	
TITLE	SD	☐ DELETE		5.1 TITLE		☐ Change ☐ Addition	
NAME	KEELER, CARL			5.2 NAME			
STREET ADDRESS	211 CHAUNCEY AVE E			5.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL			5.4 CITY-ST-ZIP			
TITLE	VPO	☐ DELETE		6.1 TITLE		☐ Change ☐ Addition	
NAME	KIM YOUNG-SHEPHERD			6.2 NAME			
STREET ADDRESS	481 S. LINE AVE.			6.3 STREET ADDRESS			
CITY-ST-ZIP	SARASOTA FL 34237			6.4 CITY-ST-ZIP			

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.

SIGNATURE  DATE **2/5/97**

CR2E037 (9/96)