

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

FILED  
Mar 22, 1999 8:00 am  
Secretary of State

03-22-1999 90141 041 \*\*\*\*61.25

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1. Corporation Name

NATURE COAST FESTIVAL MUSIC INCORPORATED

Principal Place of Business  
10090 SLEEPY WILLOW COURT  
SPRING HILL FL 34608

Mailing Address  
10090 SLEEPY WILLOW COURT  
SPRING HILL FL 34608



2. Principal Place of Business

21 3300 Morven Drive  
Suite, Apt. #, etc.

2a. Mailing Address

26 3300 Morven Drive  
Suite, Apt. #, etc.

3. Date Incorporated or Qualified

08/23/1996

4. FEI Number

59-3408626

Applied For  
Not Applicable

City & State

23 Spring Hill, FL

City & State

28 Spring Hill, FL

Zip Country

24 34609

Zip Country

29 34609

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

DESAUTELS, RICHARD M  
10090 SLEEPY WILLOW COURT  
SPRING HILL FL 34608

10. Name and Address of New Registered Agent

81 Name

Horn, Daniel

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

3300 Morven Drive

83

84 City

Spring Hill

FL

85 Zip Code

34609

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 obligation of, Section 617.0503, Florida Statutes.

SIGNATURE

*[Signature]*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/18/99

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME DESAUTELS, RICHARD  
STREET ADDRESS 10090 SLEEPY WILLOW COURT  
CITY-ST-ZIP SPRING HILL FL

TITLE TSD ☒ DELETE

NAME DESAUTELS, CAROL P  
STREET ADDRESS 10090 SLEEPY WILLOW COURT  
CITY-ST-ZIP SPRING HILL FL

TITLE D ☒ DELETE

NAME DESAUTELS, MICHAEL L  
STREET ADDRESS 1 SEYMOUR COURT  
CITY-ST-ZIP TROY NY

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME Horn, Daniel  
1.3 STREET ADDRESS 3300 Morven Drive  
1.4 CITY-ST-ZIP Spring Hill, FL 34609 - 2775

2.1 TITLE SD ☒ Change ☐ Addition

2.2 NAME Schwartz, Helen  
2.3 STREET ADDRESS 6327 Skyline Court  
2.4 CITY-ST-ZIP Spring Hill, FL 34606 - 4820

3.1 TITLE TD ☒ Change ☐ Addition

3.2 NAME Dougherty, Mary Ann  
3.3 STREET ADDRESS 1321 Henry Avenue  
3.4 CITY-ST-ZIP Spring Hill, FL 34608 - 5118

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  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE: *[Signature]* **SIGNATURE REQUIRED** V. Horn 3/18/99 352/685-8906  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)