DOCHI	MENT #	:/V4:10C	としてものつ	م	* 1.		•			
DOCUMENT #/V9.7000000830							FILED			
Patro	ns of I	Exceptiona	l Artists, In	.c.		*	00	SEP 25	PN I	2: 53
Principal Place of Business 20191 East Country Club Drive Suite 709							SECRETARY OF STATE TALLAHASSEE FLORIDA			
Aventi		FL 33180								
2. Principal Pla	ace of Busines	s	3. Mailing Address	_						
Same as above				Same as above						
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State			City & State	_			4. FEI Number 65-0758284	. , , , , , , , , , , , , , , , , , , ,		pplied For ot Applicable
Zip		Country	Zip	Cour	ntry .		5. Certificate of Status Desired		.75 Ad Require	
	6Name ar	nd Address of Curren	t Registered Agent-		•		7. Name and Address of New R	egistered Age	nt	
Jack H	Brodsky	, 0	·		Name					
20191 East Country Club Drive, Suite 709					Street	reet Address (P.O. Box Number is Not Acceptable)				
Aventi		L 33180							_	
111 01101	ara, r	1 33100			City			FL	Zip Coo	e
					<u></u>					
8. The above i	named entity s	ubmits this statement	for the purpose of changing i	ts register	ed office	or registere	d agent, or both, in the State of Flo	rida.		
OLONIATURE							9	/7/00		
SIGNATURE _	Signature, typed or p	printed name of registered age	nt and title if applicable. (NO	TE: Registere	ed Agent sign	ature required w	rhen reinstating)	DATE		
	equirement and	e to satisfy its Intangib d elects to do so.	le FILE NOV After SEPTEMBER Make Check Pay	13, 2000	Min. wil	l be \$750.i	a alam — Hust Fund Commoutor			30 May Be d to Fees
11.		OFFICERS ANI	D DIRECTORS	12.	ne appropried	Astronomic Contract Con-	ADDITIONS/CHANGES TO OFF	CERS AND DI	RECTOR	RS IN 11
TITLE	Pilni	.ck, Saul	(D) Delete	TITL	É		·		Change	☐ Addition
NAME	6269	NW 33rd A		NAM	se Eet address					
STREET ADDRESS CITY-ST-ZIP	Boca	Raton, F	L 33496		-ST-ZIP		- 000003 4	1 1 5 5	21 1-	·
TITLE			☐ Delete	TITL				/0001t		
NAME STREET ADDRESS		, JoEllen			ic Eet address		****** *	1.25 *	****	31.25
CITY-ST-ZIP		NW 33rd A	<i>f</i> \		-ST-ZIP		-	-		
TITLE	- Boca	Raton, F	Delete	TITL	£ .				Change	☐ Addition
NAME			(D)	NAM CTO	_					•
STREET ADDRESS CITY-ST-ZIP			ntry Club Dri		STAPLES '-ST-ZIP	e 709				
TITLE	Avent	ura FL		TITL		-			Change	☐ Addition
NAME	Brods	sky, Gisela		NAM	1E			١.	-	
STREET ADDRESS			ntry Club Dri		SULLE	∌ 709				
CITY-ST-ZIP	Avent	ura, FL			'-ST-ZIP	+			1 Change	Addition
TITLE NAME	Voni s	, Arlene	Delete	TIŢL NAM				L] Change	☐ Addition
STREET ADDRESS		Turnberr			eet address					
CITY-ST-ZIP		ura, FL		CITY	-ST-ZIP					
TITLE		·	☐ Delete	TITL					Change	Addition
NAME		, Edith	(D)	NAM TA GATO		20.3			Í	KE
STREET ADDRESS CITY-ST-ZIP		. East Cour :ura, FL	ntry Club Dr. 33180		ET ADDR 2 S '-ST-ZIP	30 1			•	
	artify that the i	oformation supplied wi	ith this filing does not qualify:	or the eve	mntion st	ated in Sect	tion 119.07(3)(i), Florida Statutes. I	further certify	that the	information
indicated of the core	on this report of poration or the	or supplemental report receiver of trustee emi	is true and accurate and that powered to execute this report, with all other ke empowere	: my signa rt as requi	ture shall ired by Cf	have the sa napter 607,	ame legal effect as if made under of Florida Statutes; and that my name	eath; that I am e appears in B	an office lock 11 d	er or director or Block 12 if
3 1		-/k.	, ,		31	DASK	61 0/0/m	<i>7</i> a.	1 0 3	1126
SIGNAT	'			1400		<i> NL-L</i> -	~ / / / / / / / / / / / / / / / / / / /			1636