FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 28 PM 7:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **720442** **(3)**

1. Corporation Name
SEVEN LIVELY ARTS FESTIVAL, INC.

Principal Place of Business	Mailing Address
2210 HAYES ST PO BOX 737 HOLLYWOOD FL 33022	2210 HAYES ST PO BOX 737 HOLLYWOOD FL 33022

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/08/1971
3a. Date of Last Report: 03/22/1994
4. FEI Number: 02-3111614 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 4721 THOMAS St	26 6151 MIRAMAR Parkway
Suite, Apt. #, etc. 22 Box 737	Suite, Apt. #, etc. 27 315
City & State 23 Hollywood, FL	City & State 28 MIRAMAR FL
Zip / Country 24 33021 / 25 USA	Zip / Country 29 33023 / 30 USA

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — **$68.75** Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032,* Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
GORDON, EVE ~~3320-D SIMMS ST~~ 6151 MIRAMAR Parkway ~~HOLLYWOOD FL 33021~~ MIRAMAR, FL 33023	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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD	11 TITLE	☐ Change ☐ Addition
NAME	STARR, MICHAEL	12 NAME	
STREET ADDRESS	2210 HAYES ST	13 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	14 CITY-ST-ZIP	
TITLE	PD	21 TITLE	☒ Change ☐ Addition
NAME	GORDON, EVE	22 NAME	
STREET ADDRESS	~~3320-D SIMMS ST~~	23 STREET ADDRESS	6151 MIRAMAR Parkway
CITY-ST-ZIP	~~HOLLYWOOD, FL 33021~~	24 CITY-ST-ZIP	MIRAMAR, FL 33023
TITLE	VD	31 TITLE	☒ Change ☐ Addition
NAME	NADLER, INA	32 NAME	
STREET ADDRESS	~~2210 HAYES STREET~~	33 STREET ADDRESS	6151 MIRAMAR Parkway
CITY-ST-ZIP	HOLLYWOOD FL	34 CITY-ST-ZIP	MIRAMAR FL 33023
TITLE	S	41 TITLE	☒ Change ☐ Addition
NAME	FANKHAUSER, SUE	42 NAME	
STREET ADDRESS	~~2210 HAYES STREET~~	43 STREET ADDRESS	6151 MIRAMAR Parkway
CITY-ST-ZIP	HOLLYWOOD FL	44 CITY-ST-ZIP	MIAMAR FL 33023
TITLE	TD	51 TITLE	☐ Change ☐ Addition
NAME	SCHNAERMAN, JOEL	52 NAME	
STREET ADDRESS	6151 MIRAMAR Parkway	53 STREET ADDRESS	
CITY-ST-ZIP	MIRAMAR, FL 33023	54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Joel R Schnaerman 4/24/95 305 963 3247
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
JOEL SCHNAERMAN

0000049