

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 730685

(5)

1. Corporation Name

MUSIC UNDER THE STARS INC.



Principal Place of Business

Mailing Address

C/O FRIENDS OF THE ORANGE PARK LIBRARY
2054 PLAINFIELD AVE
ORANGE PARK FLORIDA 32073
US

% DAVID A. KING, ATTORNEY
1416 KINGSLEY AVENUE
ORANGE PARK FLORIDA 32073

3. Date Incorporated or Qualified

09/16/1974

3a. Date of Last Report

04/24/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1793356

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

23

28

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

24

25

Country

29

Zip

30

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KING, DAVID A.
ATTORNEY AT LAW
1416 KINGSLEY AVE.
ORANGE PARK FL 32073

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME DELAGE, PAUL
STREET ADDRESS 736 WINFRED DRIVE SOUTH
CITY-ST-ZIP ORANGE PARK FL

11 TITLE D,VP
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE ☐ DELETE
NAME SD
STREET ADDRESS HOPKINS, ADRIANNE
CITY-ST-ZIP 646 KILCHURCH DRIVE
ORANGE PARK FL

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE ☐ DELETE
NAME TD
STREET ADDRESS O'CONNER, JULIE
CITY-ST-ZIP 1927 WOODLAKE DRIVE
ORANGE PARK FL

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE ☒ DELETE
NAME YPD
STREET ADDRESS ALPHONSE, EUGENE--
CITY-ST-ZIP 2682 SUN RIDGE COURT
ORANGE PARK FL

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE D,P
52 NAME Joseph Angelieri
53 STREET ADDRESS 1434 Orange Circle South
54 CITY-ST-ZIP Orange Park, FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE D,VP
62 NAME David Propp
63 STREET ADDRESS 220 Stowe Avenue, Apartment 16
64 CITY-ST-ZIP Orange Park, FL

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)(k), 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph Angelieri, President

2/3/96 9042645087

Daytime Phone #

CR2E037 (12/95)