

FILE NOW: FILING FEE IS \$61.25

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Mar 21 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 # **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 32073-45093. Date Incorporated or Qualified
09/16/19743a. Date of Last Report
02/28/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number
59-1793356Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**6. Election Campaign Financing
Trust Fund Contribution☐ **\$5.00 May Be Added to Fees**

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

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	VP	☒ DELETE
NAME	DELAKE, RAY	
STREET ADDRESS	136 WILFRED DRIVE SOUTH	
CITY-ST-ZIP	ORANGE PARK FL	
TITLE	SB	☒ DELETE
NAME	HOKINS, ADRIANNE	
STREET ADDRESS	1400 S. JEFFERSON DRIVE	
CITY-ST-ZIP	ORANGE PARK FL	
TITLE	TD	☒ DELETE
NAME	O'CONNER, JULIE	
STREET ADDRESS	1927 WOODLAKE DRIVE	
CITY-ST-ZIP	ORANGE PARK FL	
TITLE	PD	☐ DELETE
NAME	ANGELIERI, JOSEPH	
STREET ADDRESS	1434 ORANGE CIRCLE S	
CITY-ST-ZIP	ORANGE PARK FL	
TITLE	VP	☒ DELETE
NAME	PROPP, DAVID	
STREET ADDRESS	220 STONE HILL AVE	
CITY-ST-ZIP	ORANGE PARK FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	VP	☐ Change ☒ Addition
1.2 NAME	Kathleen Andrezejewski	
1.3 STREET ADDRESS	2764 Admirals Walk	
1.4 CITY-ST-ZIP	Orange Park, FL	
2.1 TITLE	SD	☐ Change ☒ Addition
2.2 NAME	Rita May Ranck	
2.3 STREET ADDRESS	5535 Jackson Avenue	
2.4 CITY-ST-ZIP	Orange Park, FL	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
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 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 attached statement with an address.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/97 9042645687

Date

Daytime Phone # 0001077

CR2E037 (9/96)