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05-11-1999 90042 045 ****61.25

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NONPROFIT CORPORATION
 ANNUAL REPORT
1999



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

DOCUMENT # 736962

1. Corporation Name
HOMESTEAD COMMUNITY CONCERT ASSOCIATION, INC.

Principal Place of Business
 830 N. KROME AVE.
 335 NW 20TH ST.
 HOMESTEAD FL 33030

Mailing Address
 P.O. BOX 901082
 HOMESTEAD FL 33030

545427-90042-45 7



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		10/04/1976	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-1738397	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip	Country	Zip	Country		
24	25	29	30		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
ALGER, JOLAYNE 18001 SW 285 ST HOMESTEAD FL 33030				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD <input type="checkbox"/> DELETE	1.1 TITLE	Corp Sec. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALGER, JOLAYNE	1.2 NAME	Virginia Brown
STREET ADDRESS	18001 SW 285 ST.	1.3 STREET ADDRESS	19800 S.W. 1800 Ave #36
CITY-ST-ZIP	HOMESTEAD FL 33030	1.4 CITY-ST-ZIP	Miami, FL 33187
TITLE	PD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOUGLAS, ROBERT MD.	2.2 NAME	
STREET ADDRESS	29450 SW 185 CT.	2.3 STREET ADDRESS	
CITY-ST-ZIP	HOMESTEAD FL 33030	2.4 CITY-ST-ZIP	
TITLE	Pres. <input type="checkbox"/> DELETE	3.1 TITLE	Pres <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUTZKE, SUZANNE	3.2 NAME	RUTZKE, Suzanne
STREET ADDRESS	18300 SW 280 ST.	3.3 STREET ADDRESS	18300 S.W. 280 St
CITY-ST-ZIP	HOMESTEAD FL 33031	3.4 CITY-ST-ZIP	Homestead, FL 33031
TITLE	S/D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KING, ROSE D.	4.2 NAME	
STREET ADDRESS	2509 S.E. 20TH PLACE	4.3 STREET ADDRESS	
CITY-ST-ZIP	HOMESTEAD FL 33035	4.4 CITY-ST-ZIP	
TITLE	IYP <input type="checkbox"/> DELETE	5.1 TITLE	IYP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ellen Sanford	5.2 NAME	Ellen Sanford
STREET ADDRESS	2567 S.E. 7th Ct	5.3 STREET ADDRESS	2567 S.E. 7th Ct.
CITY-ST-ZIP	Homestead, FL 33033	5.4 CITY-ST-ZIP	Homestead, FL 33030
TITLE	2VP <input type="checkbox"/> DELETE	6.1 TITLE	2VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NAKITA HARRIS	6.2 NAME	NAKITA HARRIS
STREET ADDRESS	19425 S.W. 312 St.	6.3 STREET ADDRESS	19425 S.W. 312 St
CITY-ST-ZIP	Homestead, FL 33030	6.4 CITY-ST-ZIP	Homestead, FL 33030

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-99 305247-626 Date Daytime Phone #

CR2E037 (11/98)

HOMESTEAD COMMUNITY CONCERTS
Board of Directors 1999-2000

545427-90042-45

736962

March 1, 1999

1	Bassage, Virginia	305-247-5206	2000
2	Bryan, Herb	305-247-7288	2000
3	Craig, Diane	305-233-0293	2000
4	Douglas, Bob	305-247-2714	2000
5	Fennell, Trudy	305-254-0230	2000
6	Harris, Nakita	305-248-0908	2000
7	Logg, Chuck	305-247-3267	2000
8	McAllister, Red	305-247-7409h/757-0514o	2000
9	Pierce, Jim	305-246-5141	2000
10	Thompson, Virginia Brown, Virginia	305-386-9551	2000
1	Alger, Jolayne	305-247-6261	2001
2	Anderson, Bob	305-230-1184	2001
3	Blake, Emmie	305-245-2095	2001
4	Brandenburg, Ann Marie	305-245-0898	2001
5	Gordon, Christie	305-245-0814	2001
6	Gordon, Sylvia	305-247-1567	2001
7	Kalmey, Fritz	305-245-9792	2001
8	Lynn, Sandi	305-247-2396h/247-6521o	2001
9	Neale, Libby	305-245-4270	2001
10	White, Bill	305-253-6620	2001
1	Burton, Lib	305-230-0166	2002
2	Frye, Jerry	305-247-0264	2002
3	Hanck, Barbara	305-246-4414	2002
4	Jensen, Bob	305-248-0976h/242-8607o	2002
5	King, Rose	305-230-0195	2002
6	Marcus, Carla	305-230-0216	2002
7	Richardson, Mike	305-230-0910h/242-8609o	2002
8	Rutzke, Suzanne	305-247-7946	2002
9	Sanford, Ellen	305-230-0119	2002
10	Wood, Melba	305-247-5680	2002

Officers: (Expire in odd numbered years)
 President Suzanne Rutzke
 VP1 Ellen Sanford
 VP2 Nakita Harris
 Treas Jolayne Alger
 Rec Sec Rose King
 Corr Sec Virginia Brown

(305)253-6620

E-Mail: community.concerts@110.sunshine.com Fax (305)234-6659