

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 # 743567 (0)

1. Corporation Name

THE FLORIDA MOTION PICTURE AND TELEVISION ASSOCIATION-CENTRAL CHAPTER INC.

Principal Place of Business

Mailing Address

PO BOX 206
CLARACONA FL 32710
US

PO BOX 206
CLARACONA FL 32710
US



3. Date Incorporated or Qualified

07/13/1978

3a. Date of Last Report

05/18/1995

2. Principal Place of Business

2a. Mailing Address

21 P.O. Box 690183

26 P.O. Box 690183

4. FEI Number

59-2312434

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23 City & State

Orlando, FL

27 City & State

Orlando, FL

24 Zip

32869

25 Country

US

29 Zip

32869

30 Country

US

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

MORNINGSTAR, CAROLANNE
7238 HIAWASSEE OAK DRIVE
ORLANDO FL 32818-5360

81 Name

MARA GUREVITZ

82 Street Address (P.O. Box Number is Not Acceptable)

7121 GRAND NATIONAL DRIVE
SUITE #106

84 City

ORLANDO

FL

85 Zip Code

32819

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

Mara B. Gurevitz

(NOTE: Registered Agent signature required when reinstating)

04-26-96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
CUMMINGS, JOHN
DISNEY/MGM #A-13
LAKE BUENA VISTA FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
WALSH, TONY
100 DETMAR DR.
WINTER PARK FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
WHITACRE, WILLIAM
17 S MAGNOLIA AVE.
ORLANDO FL

TITLE ☒ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
CASEY, MARY
2491 LAKEMARY BRANCH DR.
ORLANDO FL

TITLE ☒ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
MORNINGSTAR, CAROLANNE
7238 HIAWASSEE OAK DR.
ORLANDO FL

TITLE ☒ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
STREIT, ERICK
3090 RIVERBROOK LN.
WINTER PARK FL

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
DISNEY/MGM - BUNGALOW 4N
32830

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
VD

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
SD
REY WASSERMAN
1410 CALATHEA DRIVE
ORLANDO, FL

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
TD
MARA GUREVITZ
7121 GRAND NATIONAL DR. #106
ORLANDO, FL 32819

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
SD
DOREEN DORMAN HEINE
4779 WALDEN CIRCLE
ORLANDO, 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:

Mara B. Gurevitz, Treasurer

04-26-96 (407)370-0770

Date

Daytime Phone #

CR2E037 (12/95)