


FILE NOW: FILING FEE IS \$61.25

FILED

Jun 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **750916** (9)
1. Corporation Name
THE WHITE-WILLIS THEATRE, INC.



Principal Place of Business 5286 GATE LAKE RD. FT. LAUDERDALE FL 33319		Mailing Address 8761 HOLLY COURT TAMARAC FL 33321 US		3. Date Incorporated or Qualified 02/04/1980
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-1992319
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>		
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		
24. Country	29. Country	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
25. Country		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent WHITE, ANN 5286 GATE LAKE RD. FT. LAUDERDALE FL 33319		10. Name and Address of New Registered Agent	
81. Name		82. Street Address (P.O. Box Number is Not Acceptable)	
83. City		84. Zip Code	
		FL 33321	

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 Dorothy Willis DATE 4/23/98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	ED	1.1 TITLE	Artistic Director - T
NAME	WHITE, ANN	1.2 NAME	JACKIE WARNER
STREET ADDRESS	5286 GATE LAKE RD.	1.3 STREET ADDRESS	7731 TRENT DR
CITY-ST-ZIP	FT LAUDERDALE FL	1.4 CITY-ST-ZIP	TAMARAC, FL 33321
TITLE	PD	2.1 TITLE	
NAME	WILLIS, DOROTHY	2.2 NAME	
STREET ADDRESS	8761 HOLLY COURT	2.3 STREET ADDRESS	
CITY-ST-ZIP	TAMARAC FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	
NAME	KRAKOW, BOB	3.2 NAME	
STREET ADDRESS	7516 FAIRFAX DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	TAMARAC FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	STEINLAUF, DANIEL	4.2 NAME	
STREET ADDRESS	8491 GATEHOUSE RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	SPIEGEL, STEVE	5.2 NAME	
STREET ADDRESS	P.O. BOX 50136	5.3 STREET ADDRESS	
CITY-ST-ZIP	LIGHTHOUSE BEACH FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

CP2E037 (10/97)