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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # F94000000698

TEDROW ENTERTAINMENT CORPORATION

-		man by matter				
Principal Place of Business	;	Mailing Address	_			
1110 PALMER AVENUE WINTER PARK FL 32789	٠	P.O. BOX 2004 Winter Park FL 32790				

## **FILED** Jan 29, 1999 8:00am **Secretary of State**

01-29-1999 90018 005 \*\*\*150.00



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	1110 PALMER AVENUE P.O. BOX 2004 WINTER PARK FL 32789 WINTER PARK FL 32790						1	
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Ì					3. Date Incorporated or Qualifed			
					02/14/1994			
·2. Principal P	Place of Business	2a. Mailing Address			4, FEI Number	<del></del>	Applie	ed For
21		26	1		59-3166871	<u> </u>	<del></del>	pplicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				\$8.7	75 Add	
22	,	27			5. Certifcate of Status Desired		e Regu	
City & Stat	te	City & State		<del></del>	6. Election Campaign Financing		.00 ма	———
23		28			Trust Fund Contribution	1 1	ded-to-F	, ,
Zip	Country Zip Cou			·	8. This corporation owes the current	<del></del>		
24	25		0	,	Personal Property Tax.	lt year mitaligible ∐Yes	. 7	No
	9. Name and Address of Curre		, , , , , , , , , , , , , , , , , , ,		10. Name and Address of New Re			
			81	Name		<u> </u>		
TED	row, Thomas		<u> </u>	<u> </u>				
1110	PALMER AVENUE		82	Street Add	dress (P.O. Box Number is Not Acceptable	le)		
	TER PARK FL 32789		83	1				
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	- <b></b>		84	City		FL  85	Zip Coo	de ]
11. Pursuant	to the provisions of Sections 607.050	02 and 697.1508, Florida Statutes	i, the abov	e-named corp	poration submits this statement for the pu	urpose of changin	g its reg	gistered
office or r	registered agent, or both, in the State	of Florida. Such change was aut	horized by	the corporati	ion's board of directors. I hereby accept t	the appointment a	as regist	tered
			d Statuto	<b>,</b>	1-11-99	•		
SIGNATURE	Signature, typed or printed pales of registered age				//	DATE		
	Signature, typed or printed pare of registered age	antalie and a spoliciere.	legistered Age	nt signature requir	ed when reinstating)	UAIG		
12.		ont a falle if applicable. (NOTE: R	13.	nt signature requin	ed when reinstating)  ADDITIONS/CHANGES TO OFFICE		CTORS	IN 12
12.				nt signature requir				IN 12
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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 his report as required by Chapter 607, 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: