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NONPROFIT CORPORATION annual report

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Ke<u>rtham</u>

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

N02680

(9)

FLORIDA EDUCATIONAL TELEVISION, INC.

Principal Place of Business Mailing Address 22-502 ROYAL PALM WAY 22-502 ROYAL PALM WAY C/O DR. R. WILLIAM HENKEL C/O DR. R. WILLIAM HENKEL **BOCA RATON FL 33432-4812** BOCA RATON FL 33432 3. Date Incorporated or Qualified 04/23/1984 3a. Date of Last Report 01/25/1996 2. Principal Place of Business Applied For Not Applicable Suite. Apt \$8.75 Additional 22 Fee Required City & 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zic Country This corporation has liability for intangible tax under s. 199.032, 24 25 Yes No Florida Statutes 9. Name and Address of Current Registered Ag 10. Name and Address of New Registered Agent HENKEL, R. WILLIAM DR Box Number is Not Acceptable) 85 Zip Code 11. Pursuant the above-named corporation submits this statement for the purpose of changing its registered norized by the corporation's board of directors. I hereby accept the appointment as registered office or SIGNATURE OFFICERS AND DIRECTORS 12. ADDITIONS O OFFICERS AND DELETE PSD THE F Addition HENKEL, R. WILLIAM DR NAME STREET ADDRESS CITY - ST - ZIP 1.4 CITY - ST- 2 DELETE THUE ___ Addition SCHECTOR, MORRIE LEE DR STREET ADDRESS DOOL DATION FL CHY-SI-ZIP DELETE TITLE Addition ALBURY, ELIZABETH H DR NAME STREET ADDRESS CITY - ST - ZIF 3.4. CITY-ST-ZIP DELETE TITLE Change Addition 41 TITLE 33308 NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-S1-ZIF 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE __ Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

FILED

Mar 21 1997 8:00am

Secretary of State

6.4 CHTY-ST-ZIP CITY - \$1 - 2)P 14. I do hereby certify th he exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicale and that my signature shall have the same legal effect as if made under oath; that his report as required by Chapter 617, Florida Statutes; and that my name I am an officer or appears in Block

SIGNATURI