FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

N06072

(5)

FILED									
Mar 12 1998 8:00am									
Secretary of State									

SEASIDE MUSIC THEATER, INC.											
Principal Place of Business Mailing Address							r station by Bails Aftir Date (Date 110) Didit	(U)) U)E() U)	mit Otfil Otfil 100.		
901 6TH STRE P O BOX 2835 DAYTONA BEA US		901 6TH STREET P O BOX 2835 DAYTONA BEACH FL 32 US	P O BOX 2835 DAYTONA BEACH FL 32120				1. Date Incorporated or Qualified 11/08/1984 I. FEI Number 59-2501526		Applied For		
2. Principal F	lace of Business	26. Mailing Address	⊢			5	i. Certificate of Status Desired		5 Additional e Required		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
City & Stat	в	City & State			7	7. Is this nonprofit corporation a homeowners association?					
Zip	Country	Zip		intry		8	. This corporation owes or has paid the co	ırrent yea			
24	25	29	30				Personal Property Tax due June 30.	Yes	D⊴ No		
	9. Name and Address of Curre	nt negistered Agent		81	Name	10). Name and Address of New Registered	Agent			
MENDA	I DAVID D										
	.L, David R Th Street			82	Strøet A	Address (i	ss (P.O. Box Number is Not Acceptable)				
DAYTON	IA BEACH FL 32117			83							
				84	City		F	85	Zip Code		
11. Pursuant office or r agent. I a	to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 617.1508, Florida State of Florida. Such change wayations of, Section 617.0503,	utes, the al s authorize Florida Stat	pove d by utes	named of the corp	corporation's	on submits this statement for the purpose board of directors. I hereby accept the ap	-	ng its registered t as registered		
SIGNATURE											
12.	Signature, typed or printed name of registered ag	ent and title it applicable. (N ID DIRECTORS	OTE: Registered	1 Ager	nt signature r		an reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIBEC	TORS IN 12		
TITLE	PD	DELETE	1.1 Tr	TLE			ABBITION GOT INTIGES TO OUT TOETS ALL	Char			
NAME	DAVIDSON, HERBERT M.,JR.		1.2 N/	ME	j						
STREET ADDRESS	901 SIXTH STREET		1.3 ST	HEET	ADDRESS						
CITY-ST-ZIP	DAYTONA BEACH FL		1.4 Cf	TY-ST	- ZiP						
TITLE	VD	☐ DELETE		2.1 TITLE				Char	ge Addition		
NAME	TRUILO, JULIA DAVIDSON		2.2 NA	ME							
STREET ADDRESS	901 SIXTH ST		2.3 ST	REET /	ADORESS						
CITY-ST-ZIP	DAYTONA BCH FL		2. 4 C	TY-S	T-ZIP						
TITLE	TASD	DELETE	3.1 TII	TLE				Chan	ge Addition		
NAME	KANEY, GEORGIA M.		3.2 NA								
STREET ADDRESS	901 SIXTH STREET				ADDRESS						
CITY-ST-ZIP	DAYTONA BEACH FL	☐ DELETE	3.4. CI		T-ZIP			Chan	go Addition		
TITLE	SD Davidson, Marc L.	☐ DECEIE	4.1 Trī		i			Chair	ge L. Addition		
NAME	901 SIXTH ST		4.2 N								
STREET ADDRESS	DAYTONA BCH FL				ADDRES\$						
CITY-ST-ZIP TITLE	DATIONA BOTTE	☐ DÉLETE	4.4 CF 5.1 TO		-ZIP			☐ Chan	ge Addition		
NAME			5.2 NA		İ			O/,G/.	, Land		
STREET ADDRESS			1		ADDRESS						
CITY-ST-ZIP			5.4 CI		- 1		•				
TITLE		DELETE	6.1 Til		-"			Chan	ge Addition		
NAME	v'		6.2 NA		i						
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP			6.4 CIT								

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 cath; 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 changid or on an attachment with an address.

2/4/98

904-252-1511