

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 # **N14767** (0)

1. Corporation Name

GUILD FOR INTERNATIONAL PIANO COMPETITIONS, INCORPORATED



Principal Place of Business

**313 CRANESNEST WAY
WEST PALM BEACH FL 33401**

Mailing Address

**313 CRANESNEST WAY
WEST PALM BEACH FL 33401**

3. Date Incorporated or Qualified
05/12/1986

3a. Date of Last Report
03/02/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FINLEY, CHANDLER
1645 PALM BEACH LAKES #300
WEST PALM BEACH FL 33401**

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent (and title, if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **STP** ☐ DELETE
NAME **BRYAN, JOHN**
STREET ADDRESS **313 CRANESNEST WAY**
CITY - ST - ZIP **W PALM BCH FL 33401**

1.1 TITLE **P** ☒ Change ☐ Addition
1.2 NAME **BRYAN, JOHN**
1.3 STREET ADDRESS **313 CRANESNEST WAY**
1.4 CITY - ST - ZIP **W PALM BEACH FL 33401**

TITLE **T** ☒ DELETE
NAME **DELISLE, ANNE**
STREET ADDRESS **1309 13 WAY**
CITY - ST - ZIP **WEST PALM BEACH FL**

2.1 TITLE **T** ☐ Change ☒ Addition
2.2 NAME **arcentales, eduardo**
2.3 STREET ADDRESS **209 AVILA ROAD**
2.4 CITY - ST - ZIP **WEST PALM BEACH FL 33405-1658**

TITLE **D** ☐ DELETE
NAME **DANIELS, ALVA G**
STREET ADDRESS **44 COCOANUT ROW**
CITY - ST - ZIP **PALM BCH FL 33480**

3.1 TITLE **S** ☒ Change ☐ Addition
3.2 NAME **DANIELS, ALVA G**
3.3 STREET ADDRESS **44 COCOANUT ROW**
3.4 CITY - ST - ZIP **PALM BEACH FL 33480**

TITLE **D** ☒ DELETE
NAME **WHITTEY, CAROLYN GRANT**
STREET ADDRESS **1601 S. FLAGLER DRIVE**
CITY - ST - ZIP **WEST PALM BEACH FL**

4.1 TITLE **D** ☐ Change ☒ Addition
4.2 NAME **DORIN, MIRIAM**
4.3 STREET ADDRESS **2560 SOUTH OCEAN**
4.4 CITY - ST - ZIP **PALM BEACH FL 33480**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE **D** ☐ Change ☒ Addition
5.2 NAME **NICHOLS, MARION**
5.3 STREET ADDRESS **4090 GEM LAKE DRIVE**
5.4 CITY - ST - ZIP **GLEN RIDGE FL 33406-3254**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN BRYAN, PRESIDENT

FEB 7, 1996 (407) 833-8817

CR2E037 (12/95)