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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N20550

(2)

1. Corporation Name

ROCK-OUT AUBURNDAL, INCORPORATED



Principal Place of Business

Mailing Address

115 PATTERSON DRIVE
AUBURNDAL FL 33823

115 PATTERSON DRIVE
AUBURNDAL FL 33823

3. Date Incorporated or Qualified

05/08/1987

3a. Date of Last Report

05/02/1995

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

GABALDON, ADRIAN
210 S. BARTOW AVENUE
AUBURNDAL FL 33823

81 Name

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

83

000001869390

84 City

-06/20/96--01039-018

***\$61.25

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 reissuing)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME JAMES, ANN
STREET ADDRESS 115 PATTERSON DR.
CITY-ST-ZIP AUBURNDAL FL 33823

TITLE VPD
NAME BOYKIN, BILL
STREET ADDRESS 103 PERRY AVE.
CITY-ST-ZIP AUBURNDAL FL

TITLE VP
NAME SINCLAIR, EMILY E.
STREET ADDRESS 2579 KING AVENUE
CITY-ST-ZIP AUBURNDAL FL

TITLE RS
NAME MULFORD, GERI
STREET ADDRESS RT. 1, BOX 308
CITY-ST-ZIP AUBURNDAL FL

TITLE TD
NAME CONNER, MARSHA
STREET ADDRESS 2504 ARIANA BLVD.
CITY-ST-ZIP AUBURNDAL FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D President
1.2 NAME James, Ann
1.3 STREET ADDRESS 115 Patterson Drive
1.4 CITY-ST-ZIP Auburndale, FL 33823

2.1 TITLE D Vice President
2.2 NAME Boykin, Bill
2.3 STREET ADDRESS 103 Perry Avenue
2.4 CITY-ST-ZIP Auburndale, FL 33823

3.1 TITLE T Second Vice President
3.2 NAME Sinclair, Emily E.
3.3 STREET ADDRESS 2579 King Avenue
3.4 CITY-ST-ZIP Auburndale, FL 33823

4.1 TITLE T Recording Secretary
4.2 NAME Mulford, Geri
4.3 STREET ADDRESS Rt. 1, Box 308
4.4 CITY-ST-ZIP Auburndale, FL 33823

5.1 TITLE ① Treasurer
5.2 NAME Conner, Marsha
5.3 STREET ADDRESS 2504 Ariana Blvd.
5.4 CITY-ST-ZIP Auburndale, FL 33823

6.1 TITLE T Dolores Borkowski
6.2 NAME
6.3 STREET ADDRESS 102 Joseph Circle
6.4 CITY-ST-ZIP Auburndale, FL 33823

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: Ann James

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 29, 1996-9419675829

Date

Daytime Phone #

05 6119191

CR2E037 (12/95)