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FILED
May 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # **N23202** **(7)**

1. Corporation Name

FRIENDS OF THE LYRIC, INC.

Principal Place of Business	Mailing Address
59 FLAGLER AVE STUART FL 34994	59 FLAGLER AVE STUART FL 34994

3. Date Incorporated or Qualified: 10/28/1987

4. FEI Number: 65-0016846 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / Country (25)	Zip (29) / Country (30)

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

NOVAK, PATRICIA A
3515 CANOE PLACE
#3 103
PALM CITY FL 34990

10. Name and Address of New Registered Agent

81 Name: Michael Hayes
82 Street Address (P.O. Box Number is Not Acceptable): 18658 SE River Edge Rd.
83
84 City: Tequesta FL 85 Zip Code: 33469

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 _____ 4-22-98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE	V.P.	☐ Change ☐ Addition
NAME	NOVAK, PATRICIA A		1.2 NAME	Robert Burson	
STREET ADDRESS	3515 CANOE PLACE		1.3 STREET ADDRESS	1569 SE Pitcher Rd.	
CITY-ST-ZIP	PALM CITY FL		1.4 CITY-ST-ZIP	Port St. Lucie, FL 34952	
TITLE	VD	☒ DELETE	2.1 TITLE	VP	☐ Change ☒ Addition
NAME	MAC MILLAN, DAVID		2.2 NAME	John Nickerson	
STREET ADDRESS	201 SE HARBOR POINT DR		2.3 STREET ADDRESS	919 NE Juniper Place	
CITY-ST-ZIP	STUART FL		2.4 CITY-ST-ZIP	Jensen Beach, FL 34957	
TITLE	T OK	☐ DELETE	3.1 TITLE		☐ Change ☒ Addition
NAME	BAILEY, PRISCILLA		3.2 NAME	Brenda Bashant CS	(D) Secretary
STREET ADDRESS	3102 S.W. MARTIN DOWNS BLVD.		3.3 STREET ADDRESS	111 Cortez	
CITY-ST-ZIP	PALM CITY FL		3.4 CITY-ST-ZIP	Stuart, FL 34994	
TITLE	VP	☐ DELETE	4.1 TITLE	Past President	☐ Change ☐ Addition
NAME	MCLAUGHLIN, KEVIN		4.2 NAME	Kevin McLaughlin	(D)
STREET ADDRESS	4211 N.E. CHERI DRIVE		4.3 STREET ADDRESS	4211 NE Cheri Dr.	
CITY-ST-ZIP	JENSEN BEACH FL		4.4 CITY-ST-ZIP	Jensen Beach FL 34957	
TITLE	TD	☐ DELETE	5.1 TITLE	President	☐ Change ☐ Addition
NAME	HAYES, MICHAEL		5.2 NAME	Michael Hayes	
STREET ADDRESS	US #1 & COLORADO AVE		5.3 STREET ADDRESS	18658 SE River Edge Rd.	
CITY-ST-ZIP	STUART FL		5.4 CITY-ST-ZIP	Tequesta FL 33469	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (10/97)

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 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: _____ 4-22-98