

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 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
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DOCUMENT # **N44455** (6)
1. Corporation Name
THE FLAGLER AUDITORIUM GOVERNING BOARD, INC.



Principal Place of Business THE FLAGLER COUNTY SCHOOL BOARD STATE ROAD 100 BUNNELL FL 32110	Mailing Address FLAGLER CO. SCHOOL BOARD P.O. BOX 755 BUNNELL FL 32110
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 07/26/1991	
4. FEI Number 59-3079371	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent CHIUMENTO, MICHAEL D. 4 OLD KINGS ROAD NORTH PALM COAST FL 32137
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10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> DELETE
NAME	ADAMS, RICHARD
STREET ADDRESS	16 WESTFALLS LANE
CITY-ST-ZIP	PALM COAST FL 32137
TITLE	D <input type="checkbox"/> DELETE
NAME	BERGEN, JOYCE
STREET ADDRESS	5 BOYD PLACE
CITY-ST-ZIP	PALM COAST FL 32137
TITLE	D <input type="checkbox"/> DELETE
NAME	DICKSON, DAVE
STREET ADDRESS	125 WOODHAVEN DRIVE
CITY-ST-ZIP	PALM COAST FL 32137
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	FRECKLETON, LLOYD
STREET ADDRESS	540 LAMBERT AVE
CITY-ST-ZIP	FLAGLER BEACH FL 32136
TITLE	D <input type="checkbox"/> DELETE
NAME	QUBERMAN, MICHAEL S
STREET ADDRESS	C/O FLAGLER COUNTY SCHOOLS HIGHWAY 100 E
CITY-ST-ZIP	BUNNELL FL 32110
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

SEE NEW
LIST ATTACHED

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: *[Signature]* 3/16/98 (904) 437-7547

CR2E037 (10/97)



1997-98 GOVERNING BOARD MEMBERS

Last Name	First Name	Address	City	Zip Code	Home #	Work #	Term Expires
Adams	Richard	16 Westfalls Lane	Palm Coast	32137	445-3707	446-6109	July 1999
Alleman	Beverly	13 Anastasia Court	Palm Coast	32137	445-4653		July 2000
Bergen	Joyce	5 Boyd Place	Palm Coast	32137	445-5382		July 1998
Carr	James M.	2 Folcroft Lane	Palm Coast	32137	445-4259		July 1998
Dickson	Dave	125 Woodhaven	Palm Coast	32137	446-9323		July 1998
Guberman	Michael S.	13 Patrick Place	Palm Coast	32164	437-7547		EX-Office
Guines	James T.	3 Woodlyn Lane	Palm Coast	32164	446-0615		EX-Office
Kaupke	Donn V.	11 Wildermess Run	Flagler Beach	32136	437-7526		Ex-Office
Kingsbury	Daniel	1 Old Kings Road S.	Palm Coast	32137	446-9292	447-0800	July 2000
Lusby	David	1 Corporate Drive	Palm Coast	32151	673-8891	445-2646	July 2000
Morris	Laura	500 N. Chapel	Bunnell	32110	437-3233		July 1998
O'Brien	Donald	55 Boston Lane	Palm Coast	32137	446-5342	822-4925	July 1999
Reel	Ralph	9 Blackburn Place	Palm Coast	32137	445-4165		July 2000
Varnier	Dave	49 Hembury Lane	Palm Coast	32137	445-7152	676-0254	July 1999
Walters	Bobbie	46 Captain's Walk	Palm Coast	32137	445-2307		July 1999

REC.
EAS.
PRES.