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NONPROFIT CORPORATION ANNUAL REPORT



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FLORIDA DEPARTMENT OF STATE

FILED

Jan 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State . DIVISION OF CORPORATIONS

1997
DOCUMENT #

Principal Place of Business

N93000000358 (2)

Mailing Address

ROYAL PALM PERFORMING ARTS THEATRE, INC.

11818 SUNSET BLVD. 11818 SUNSET BLVD. ROYAL PALM BEACH FL 33411 ROYAL PALM BEACH FL 33411-8824 3a. Date of Last Report 01/26/1996 Date Incorporated or Qualified 01/27/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0384634 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 28 Zip Country Country $Z_{\rm ID}$ 8. This corporation has liability for intangible tax under s. 199.032, Yes ANO Florida Statutes 24 29 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MCCARTHY, KATHLEEN Z Street Address (P.O. Box Number is Not Acceptable)
11 8/8 Sun Set Blud 7635 PALM ROAD 83 WEST PALM BEACH FL 33406 Royal Palm 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

State of the provisions of Sections 617.0502 and 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of. Section 617.0503, Florida Statutes.

SIGNATURE

State of the provisions of Sections 617.0502 and 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of the purpose of changing its registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Labona Lightman 3326 Arcara Way #401 Lake Worth Fl 33467 PD DELETE 1.1 TITLE Change TITLE PAGLIARO, PETER 1.2 NAME NAME 11818 SUNSET BLVD. 1.3 STREET ADDRESS STREET ADDRESS ROYAL PALM BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 2.1 TITLE TITLE PAGLIARO, DEBORAH 2.2 NAME NAME 11818 SUNSET BLVD. 2.3 STREET ADDRESS STREET ADDRESS ROYAL PALM BEACH FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE CANDICE COPPOLETTA NAME 3.2 NAME 12221 59TH ST. NORTH STREET ADDRESS 3.3 STREET AODRESS ROYAL PALM BEACH FL 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME LIZ LAMORTE 4.2 NAME STREET ADDRESS 5461 HUDDLE HILL RD. 4.3 STREET ADDRESS LAKE WORTH FL 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME DONNA ELDREDGE 5.2 NAME 17076 ORANGE GROVE BLVD. 5.3 STREET ADDRESS STREET ADDRESS LOXAHATCHEE FL 5.4 CITY - ST-ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE **ROBERT JONES** NAME 6.2 NAME STREET ADDRESS 3530 HARWICH COURT 6.3 STREET ADDRESS **GREENACRES FL** 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I do 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

SIGNATURE: Peter Pagliano Peter Pagliaro President 1-7-97 686-4006 X 14