FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

160 3RD AVE S

- :: E NAPLES FL 34102



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #
1. Corporation Name

N94000001598 (1)

THE NAPLES PLAYERS THEATRE GUILD, INC.

Principal Place of Business Mailing Address 899 GOODLETTE ROAD SOUTH 399 GOODLETTE ROAD SOUTH 3. Date Incorporated or Qualified NAPLES FL 33940 NAPLES FL 33940 03/28/1994 4. FEI Number Applied For 59-6154976 Not Applicable 2. Principal Place of Business 2a. Mailino Address \$8.75 Additional 5. Certificate of Status Desired 図 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. Election Campaign Financing \$5.00 May Be 22 **Trust Fund Contribution** Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 ☐ No Yes Yes Zip Country Zio Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent A1 Name RICHARD HYDEMAN 82 Street Address (P.O. Box Number is Not Acceptable)

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.

83

84 City

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 DILE Change JANE GRACELY MARY JAKE GRACELY 205 THIRD AVE NORTH NAME MARY JANE GRACELY 1.2 NAME STREET ADDRESS 201 THIRD AVE NORTH 1.3 STREET ADDRESS NAPLES FL APLES FL 34182 CITY-ST-ZW 1.4 City-St-ZIP DELETÉ **Change** TITLE 2.1 TITLE Addition HYDEMAN, RICHARD HYDEMAN, RICHARD NAME 2.2 NAME 160 BRD AVE. So. STREET ADDRESS 160 3RD AVE. S. 2.3 STREET ADDRESS Naples Fl 48946 NAPLES FL 34102 CITY-ST-ZIP 2.4 City-ST-ZIP DELETE TETLE 3.1 TITLE ☐ Change **Addition** PLEASANCE, PEG 2465 KINGS LAKE BLUD ABERNATHY, KENNETH L NAME 3.2 NAME STREET ADDRESS 4200 BELAIR LANE, APT. 108 3.3 STREET ADDRESS NAPLES FL 33940-3179 CITY-ST-ZIP 3.4. CITY-ST-ZIP NAPLES FL 34112 TITLE DELETE Change 4.1 TITLE Addition HYDEMAN, BETSY L. 160 BRD AVE SO. NAME HYDEMAN, BETTY L 4.2 NAME 180 3RD AVE. S. STREET ADORESS 4.3 STREET ADDRESS NAPLES FL \$30707 CITY-ST-ZIP NAPLES FL 3410> 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE **Addition** LE GRAND, JOAN NAF 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP NAPLBS FL 34112 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Addition TUGLEMAN, GLORIA 3103 RIVIERA DR 6 2 NAME STREET ADDRESS 6.3 STREET ADDRESS 34103

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 attechment with an address.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

FL

FILED

Apr 28 1998 8:00am

Secretary of State

Zip Code