

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

APPROVED  
AND  
FILED

1997 OCT 20 PM 4: 28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N95000002922 (1)

1. Corporation Name

DUR MUSIC SCHOOL OF THE ARTS, INC.

Principal Place of Business

Mailing Address

2200 N. FLORIDA MANGO RD  
2ND FLOOR  
WEST PALM BEACH FL 33409

2200 N. FLORIDA MANGO RD  
2ND FLOOR  
WEST PALM BEACH FL 33409

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/19/1995

3a. Date of Last Report

02/04/1997

4. FEI Number

65-0588512

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE

NAME Durr, Nicole  
STREET ADDRESS 2200 N. FLORIDA MANGO RD., 2ND FLOOR  
CITY-ST-ZIP WEST PALM BEACH FL 33409

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME  
1.3 STREET ADDRESS 1016 N. Dixie Hwy Ste 1  
1.4 CITY-ST-ZIP West Palm Beach, FL 33401

TITLE D ☒ DELETE

NAME Holder, Harold  
STREET ADDRESS 2200 N. FLORIDA MANGO RD., 2ND FLOOR  
CITY-ST-ZIP WEST PALM BEACH FL 33409

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME Karen F. Bielski  
2.3 STREET ADDRESS 2389 Palm Harbor Dr.  
2.4 CITY-ST-ZIP Palm Beach Gardens, FL 33410

TITLE D ☐ DELETE

NAME Coriaty, Ehab H  
STREET ADDRESS 2200 N. FLORIDA MANGO RD., 2ND FLOOR  
CITY-ST-ZIP WEST PALM BEACH FL 33409

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS 1016 N. Dixie Hwy Ste 1  
3.4 CITY-ST-ZIP West Palm Beach, FL 33401

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE REQUIRED

9/26/97 61-1-86-775

CR2E037 (4/97)