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Feb 10 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N95000004251 (3)

1. Corporation Name

GULF COAST BLUEGRASS MUSIC ASSOCIATION, INC.



Principal Place of Business

Mailing Address

3240 GREEN VALLEY DRIVE
PENSACOLA FL 32526

3240 GREEN VALLEY DRIVE
PENSACOLA FL 32526-9330

3. Date Incorporated or Qualified
09/01/1995

3a. Date of Last Report
03/07/1996

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

4. FEI Number

59-3238461

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JEFF TILLEY
5232 EMERALD DRIVE
PACE FL 32571

81 Name Donald L. Copeland

82 Street Address (P.O. Box Number is Not Acceptable)
3240 Green Valley Drive

83

84 City Pensacola FL 85 Zip Code 32526

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 *Donald L. Copeland*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE 1/25/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D DELETE
NAME COPELAND, DON
STREET ADDRESS 3240 GREEN VALLEY DRIVE
CITY-ST-ZIP PENSACOLA FL 32526

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D DELETE
NAME SWANNER, ANGIE
STREET ADDRESS 808 MALDONADO
CITY-ST-ZIP PENSACOLA BEACH FL

2.1 TITLE Change Addition
2.2 NAME 700002086107
2.3 STREET ADDRESS -02/13/97--01007--012
2.4 CITY-ST-ZIP ***61.25

TITLE D DELETE
NAME WADE, FRANK
STREET ADDRESS 114 LILE STREET
CITY-ST-ZIP OPP AL 36467

3.1 TITLE 4 VICE PRESIDENT Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE P DELETE
NAME TILLEY, JEFF
STREET ADDRESS 5232 EMERALD DRIVE
CITY-ST-ZIP PACE FL 32571

4.1 TITLE PRESIDENT Change Addition
4.2 NAME LOGAN FINK
4.3 STREET ADDRESS 7210 BELGUIM RD.
4.4 CITY-ST-ZIP PENSACOLA, FL 32526

TITLE V DELETE
NAME BATES, O. D.
STREET ADDRESS 5026 WILLARD NORRIS ROAD
CITY-ST-ZIP MILTON FL

5.1 TITLE DIRECTOR Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE S DELETE
NAME COPELAND, CHERYL
STREET ADDRESS 3240 GREEN VALLEY DRIVE
CITY-ST-ZIP PENSACOLA FL 32526

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)(l), 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: *Logan Fink*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE 1/25/97

Daytime Phone # 0073306

CR2E037 (9/96)