

FILE NOW: FILING FEE IS \$61.25

FILED

**Feb 06 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 # N95000004251 (3)
1. Corporation Name
GULF COAST BLUEGRASS MUSIC ASSOCIATION, INC.



Principal Place of Business 3240 GREEN VALLEY DRIVE PENSACOLA FL 32526	Mailing Address 3240 GREEN VALLEY DRIVE PENSACOLA FL 32526
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3. Date Incorporated or Qualified 09/01/1995	
4. FEI Number 59-3238461	Applied For 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 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 type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**COPELAND, DONALD L.
3240 GREEN VALLEY DRIVE
PENSACOLA FL 32526**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> DELETE
NAME	COPELAND, DON
STREET ADDRESS	3240 GREEN VALLEY DRIVE
CITY-ST-ZIP	PENSACOLA FL 32526
TITLE	D <input type="checkbox"/> DELETE
NAME	SWANNER, ANGIE
STREET ADDRESS	806 MALDONADO
CITY-ST-ZIP	PENSACOLA BEACH FL
TITLE	VP <input type="checkbox"/> DELETE
NAME	WADE, FRANK
STREET ADDRESS	114 LILE STREET
CITY-ST-ZIP	OPP AL 36467
TITLE	P <input type="checkbox"/> DELETE
NAME	LOGAN, FINK
STREET ADDRESS	7210 BELGUIM RD
CITY-ST-ZIP	PENSACOLA FL 32526
TITLE	D <input type="checkbox"/> DELETE
NAME	BATES, O. D.
STREET ADDRESS	5026 WILLARD NORRIS ROAD
CITY-ST-ZIP	MILTON FL
TITLE	S <input type="checkbox"/> DELETE
NAME	COPELAND, CHERYL
STREET ADDRESS	3240 GREEN VALLEY DRIVE
CITY-ST-ZIP	PENSACOLA FL 32526

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	

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: *Wendy L. G. [Signature]* **2/1/98 (850) 944-1885**

CR2E037 (10/97)