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May 13 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 # N96000000962 (8)

1. Corporation Name  
THE WAYNE NEWTON INTERNATIONAL FRIENDS CLUB INC.



Principal Place of Business Mailing Address  
290 AKRON RD. LAKE WORTH FL 33467 290 AKRON RD. LAKE WORTH FL 33467-4802

3. Date Incorporated or Qualified 02/21/1996 3a. Date of Last Report

21	2. Principal Place of Business	2a. Mailing Address	26	4. FEI Number	Applied For
22	Suite, Apt. #, etc.	Suite, Apt. #, etc.	27	65-0644944	Not Applicable
23	City & State	City & State	28	5. Certificate of Status Desired	\$8.75 Additional Fee Required
24	Zip	Country	29	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
25		30	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

MCCONNELL, SHARON D  
290 AKRON RD.  
LAKE WORTH FL 33467

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	President /Chairman of the Board <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sharon D McConnell	1.2 NAME	
STREET ADDRESS	290 Akron Rd	1.3 STREET ADDRESS	
CITY-ST-ZIP	Lake Worth FL 33467	1.4 CITY-ST-ZIP	
TITLE	1st Vice President/Board of Directors <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kathleen Newton	2.2 NAME	
STREET ADDRESS	3422 Happy Lane	2.3 STREET ADDRESS	
CITY-ST-ZIP	Las Vegas NV 89120	2.4 CITY-ST-ZIP	
TITLE	2nd Vice President <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Margaret Noel Semola	3.2 NAME	
STREET ADDRESS	6409 Dominica Ave	3.3 STREET ADDRESS	
CITY-ST-ZIP	Cypress CA 90630	3.4 CITY-ST-ZIP	
TITLE	Treasurer <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Frances Gioia	4.2 NAME	
STREET ADDRESS	8632 Fyret Isle Tr	4.3 STREET ADDRESS	
CITY-ST-ZIP	Lake Worth FL 33467	4.4 CITY-ST-ZIP	
TITLE	Secretary <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Louise Gibbon	5.2 NAME	
STREET ADDRESS	2308 Winrock	5.3 STREET ADDRESS	
CITY-ST-ZIP	Houston TX 77957	5.4 CITY-ST-ZIP	
TITLE	Board of Directors <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Michael Forch	6.2 NAME	
STREET ADDRESS	3422 Happy Lane	6.3 STREET ADDRESS	
CITY-ST-ZIP	Las Vegas NV 89120	6.4 CITY-ST-ZIP	

14. I do hereby 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: Sharon D. McConnell 4/24/97  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0044018

CP2E037 (9/96)