

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. Morheim  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

97 OCT -7 AM 10:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N96000005137 (2)

1. Corporation Name

PALM BEACH COUNTY FILM MOTION PICTURE & TELEVISI  
ON ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1617 N. FLAGLER DRIVE  
WEST PALM BEACH FL 33407

1617 N. FLAGLER DRIVE  
WEST PALM BEACH FL 33407

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/07/1996	3a. Date of Last Report
4. FEI Number 59 2301231	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FINLEY, CHANDLER R ESQ.  
1645 PALM BEACH LAKES BLVD., SUITE 520  
WEST PALM BEACH FL 3401 - 33401

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 000002320990-1
84 City
10/15/97 - 01075 - 008
*****70.09 FL *****70.00

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	PD	1.1 TITLE	EXEC.VP
NAME	BERNHARD, GWYN	1.2 NAME	Leroy Simon / Boca Raton, FL
STREET ADDRESS	1617 N. FLAGLER DRIVE	1.3 STREET ADDRESS	789 Camino Lakes Circle
CITY-ST-ZIP	WEST PALM BEACH FL 33407	1.4 CITY-ST-ZIP	33486
TITLE	VP	2.1 TITLE	VP
NAME	EARL-LEGE	2.2 NAME	Jackson Daniels
STREET ADDRESS	84 FAIRVIEW WEST	2.3 STREET ADDRESS	1691-A Forum Place
CITY-ST-ZIP	TEQUESTA FL 33469	2.4 CITY-ST-ZIP	West Palm Beach, FL 33401
TITLE	D	3.1 TITLE	SEC
NAME	GRASS, BARBARA	3.2 NAME	Ellen Slossberg
STREET ADDRESS	845 S.W. MAGNOLIA BLUFF	3.3 STREET ADDRESS	FL 33435
CITY-ST-ZIP	PREMIER FL 34900	3.4 CITY-ST-ZIP	2141 NE 1st Ct. #200, Boynton Beach,
TITLE	TREASURER	4.1 TITLE	BD MEMBER (D)
NAME	PAUL POLISENA	4.2 NAME	JOHN GIORDANO
STREET ADDRESS	4337 OKEECHOBEE H-6	4.3 STREET ADDRESS	951 SPANISH CIRCLE F-147
CITY-ST-ZIP	W. PALM BEACH, FL 33409	4.4 CITY-ST-ZIP	DELRAY BEACH, FL 33483
TITLE	BOARD MEMBER (D)	5.1 TITLE	BOARD MEMBER (D)
NAME	HELEN JAYE	5.2 NAME	MANFRED BERNHARD
STREET ADDRESS	SCREEN TEST USA/5301 N. FEDERAL HWY	5.3 STREET ADDRESS	1617 N. FLAGLER DR 3A
CITY-ST-ZIP	BOCA RATON, FL 33487	5.4 CITY-ST-ZIP	W. PALM BEACH, FL 33407
TITLE	BOARD MEMBER (D)	6.1 TITLE	BD MEMBER
NAME	DANNY TAYLOR	6.2 NAME	HELEN BARRON (D)
STREET ADDRESS	7654 COCONUT DR.	6.3 STREET ADDRESS	1689 FORUM PLACE
CITY-ST-ZIP	LA WORTH, FL 33467	6.4 CITY-ST-ZIP	W. PALM BEACH, FL 33401

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, changed, or on an attachment with an address.

SIGNATURE: [Signature]

07 24 97 561 650 1068

CR2037 (4/97)