


FILE NOW: FILING FEE IS \$61.25

FILED

Jan 30 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N96000006257 (7) 1. Corporation Name BOCA RATON MUSIC STUDY CLUB, INC.					
Principal Place of Business 1312 LAKE DRIVE DELRAY BEACH FL 33444			Mailing Address 1312 LAKE DRIVE DELRAY BEACH FL 33444		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 12/06/1996 4. FEI Number 65-0452701 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 checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		9. Name and Address of Current Registered Agent TUTTLE, CONSTANCE 1312 LAKE DRIVE DELRAY BEACH FL 33444			
10. Name and Address of New Registered Agent NONE OWED		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 reinstalling) DATE _____ Signature, typed or printed name of registered agent and title if applicable.					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE PD NAME YAGER, JAN STREET ADDRESS 823 FORSYTH NE CITY-ST-ZIP BOCA RATON FL 33487			1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE VD NAME SCHUEHLER, MARY STREET ADDRESS 828 FORSYTH ST CITY-ST-ZIP BOCA RATON FL 33487			2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
TITLE VD NAME WALKER, HELEN STREET ADDRESS 3581 LAKEVIEW DR CITY-ST-ZIP DELRAY BEACH FL 33445			3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		
TITLE SD NAME ABBOTT, RITA STREET ADDRESS 9 ROYAL PALM WAY #9-305 CITY-ST-ZIP BOCA RATON FL 33432			4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE D NAME TUTTLE, CONSTANCE STREET ADDRESS 1312 LAKE DRIVE CITY-ST-ZIP DELRAY BEACH FL 33444			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE TD NAME BAKER, DOROTHY STREET ADDRESS 410 NW 7TH ST CITY-ST-ZIP DELRAY BEACH FL 33444			6.1 TITLE 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:

Constance Tuttle
SIGNATURE REQUIRED

JAN. 16, 1998 561-276-5900

CR2E037 (10/97)