FILE NOW: FILING FEE IS \$61.25

. MONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name N97000001952 (7)

SAVE DOWNTOWN OUTDOOR MUSIC, INC.

Principal Place of Business		Mailing Address	Mailing Address			- 1 1981/1907 919 181/1 1980) 98/11 88/11 88/11 88/11 98/11 98/11 91/18 19/18	MU 1081
958 32ND STREET SARASOTA FL 34243		958 32ND STREET SARASOTA FL 34243			3. Date Incorporated or Qualified 04/07/1997 4. FEI Number Applie	od For	
							pplicable
└	Place of Business	2a. Mailing Address				5. Certificate of Status Desired \$8.75 Add	itional
21		26				Fee Requi	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	~_1			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
City & State		City & State	<u> </u>			7. Is this nonprofit corporation a homeowners association?	
23		28	28			☐ Yes XINo	
Zip	Country	Zip	¬ ' ⊢ '			8. This corporation owes or has paid the current year Intangible	
24	9. Name and Address of Cur	zent Registered Agent	30			Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent	0
	S, Harrie Bilo Address of Our	Tent megistered Agent		11	Name	IV. Hallie Bird Address of New Hegistered Agent	
COSPI	ER, REGINA W		 -	32	Chanch Addre	iss (P.O. Box Number is Not Acceptable)	
	XORA AVENUE		<u>ַ</u>		Street Addre	iss (F.O. box Number is Not Acceptable)	
SARA!	SOTA FL 34234		E	33			
			8	14	City	85 Zip Cod	е
11. Pursuar	nt to the provisions of Sections 617 (0502 and 617 1508. Florida Stat	utes the abo	OVA-r	named corpo	pration submits this statement for the purpose of changing its re	aistered
office o	r registered agent, or both, in the St	ate of Florida. Such change was	authorized	by th	he corporatio	oration submits this statement for the purpose of changing its re on's board of directors. I hereby accept the appointment as reg	istered
SIGNATURE		ingations of, ocolor of 7.0000, 1	TOTION OTHER	100.			
SIGNATURE	Signature, typed or printed name of registered		OTE Registered A	Agent	signature required	d when reinstating) DATE	
12.		AND DIRECTORS	13.		·	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	
TITLE	DOOLEN CARY	☐ DELETE	1.1 TITU			L_J Change L	Addition
NAME	DROUIN, GARY S 958 32ND STREET		1.2 NAME 1.3 STREET ADDRESS		200000		
STREET ADDRES	CARACOTA SI CACAO		1				
CITY-ST-ZIP TITLE			1.4 CITY 2.1 T/JL		ZIP	Change	Addition
NAME	BURTON, RICHARD		2.1 III			C Cuange C	7 Vanimon
STREET ADDRESS			2.3 STREET ADDRESS		/Dates		
CITY-ST-ZIP	SARASOTA FL 34234		2. 4 CITY - ST- ZIP				
TITLE	D DELETE			3.1 TITLE		Change	Addition
NAME	WALLACH, SUSAN		3.2 NAA			_	_
STREET ADDRESS	A A D. D. A S.A. LANDSON, MICH.		1	3.3 STREET ADDRESS			
CITY-ST-ZIP	SARASOTA FL 34232	IDIAATA FI AMAA		Y - ST -			
TITLE	D	DELETE		4.1 TiTLE		Change	Addition
NAME	CONNER, KRIS E		4. 2 NAN	4. 2 NAME			,
STREET ADDRESS	2724-C HIDDEN LAKE BOU	JLEVARD	4.3 STRE	EET AD	DDRESS		
CITY-ST-ZIP	SARASOTA FL 34237		4.4 CITY	-51-	ZIP		
TITLE	D	DELETE	5.1 TITU	5.1 TITLE		Change	Addition
NAME	HUGHES, SHARON		5.2 NAM	ΙE	J		
STREET ADDRESS			5.3 STRE	ET AD	ODRESS		
CITY-ST-ZIP	SARASOTA FL 34239		5.4 CITY	-ST-	ZIP		
TITLE			6.1 TITLE	E		Change _	Addition
NAME			6.2 NAM	IE			ļ
STREET ADDRESS	s		6.3 STRE	ET AD)DAESS		
0.77/ 67 70							

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this fitting 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 an attachment with an address.

SIGNATURE:

FILED

May 15 1998 8:00am

Secretary of State