FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT

N97000004950

FROSTPROOF ART LEAGUE AND GALLERY, INC.

Dringing! Dies	and Business	Mailton Address		{	
Principal Place of Business Mailing Address					
12 EAST WALL STREET 12 EAST WALL STREET			3. Date Incorporated or Qualified		
FROSTPROOF	FL 33843	FROSTPROOF FL 33843		09/02/1997	
				4. FEI Number	Applied For
				59-3473603	Not Applicable
2. Principal Place of Business 20. Mailing Address 21.		x 654	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Suite, Apt	. #, otc	Suite, Apt. #, etc.	<u> </u>	6. Election Campaign Financing	\$5.00 May Be
22		27		Trust Fund Contribution	Added to Fees
City & Stat	te	City & State PRESTPRE	OF, FL.	7. Is this nonprofit corporation a homeowr	ners association?
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	current year Intangible
24	25	1001	10 USA	Personal Property Tax due June 30.	☐ Yes ☐2HNo
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Registers	d Agent
			81 Name		
	is, richard		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
12 EAST WALL STREET					
FROSTI	PROOF FL 33843		83		
			64 City	·_· · · · · · · · · · · · · · · · · · ·	85 Zip Code
	4			rporation submits this statement for the purpose	— :
SIGNATURE	Signature typed or printed name of registimo a	gerif and tilke if applicable (NOTE) ND DIRECTORS	Registered Agent signature requ	ulred when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DP	DELETE			Change Addition
NAME	POWERS, RICHARD		1.2 NAME	Newell A. SMITH	
STREET ADDRESS	12 EAST WALL STREET		1.3 STREET ADDRESS	12 EAST WALL ST	
CITY-ST-ZIP	FROSTPROOF FL 33843		1.4 CITY-ST-ZIP	FROSTPROOF, FL 33843	
TITLE	V	☐ DELETE	2.1 TITLE	9	Change Addition
NAME	DUNBAR, JAMES		2.2 NAME	WANNIS BOWEN	
STREET ADDRESS	12 EAST WALL STREET		2.3 STREET ADDRESS 1	2 EAST WALL ST	
CITY-ST-ZIP	FROSTPROOF FL 33843		2 4 CITY-ST-ZIP	GROSTPROOF, FC 3384B	
TITLE	S	✓ DELETE	31 TITLE		Change Addition
NAME	HARSHMAN, SHIRLEY		3.2 NAME		
STREET ADDRESS	12 EAST WALL STREET		3.3 STREET ADDRESS		
CITY-ST-ZIP	FROSTPROOF FL 33843		3 4. CITY - ST - ZIP		The same
TITLE	T TOTAL SECTION	DELETE	4.1 TITLE		Change Addition
NAME	DUNBAR, GRACE		4. 2 NAME		
STREET ADDRESS	12 EAST WALL STREET		4.3 STREET ADDRESS		
CITY-ST-ZIP	PRAATRAACT TI AAA				
	FROSTPROOF FL 33843	DELETE	4.4 CITY-ST-ZIP		Change Addition
TITLE	D	DELETE	4.4 CHY-ST-ZIP 5.1 TITLE		Change Addition
TITLE NAME	D WILSON, PATRICIA	DELETE	4.4 City-St-ZiP 5.1 Title 5.2 NAME		Change Addition
TITLE NAME STREET ADDRESS	D WILSON, PATRICIA 12 EAST WALL STREET	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		Change Addition
TITLE NAME	D WILSON, PATRICIA	DELETE	4.4 City-St-ZiP 5.1 Title 5.2 NAME		☐ Change ☐ Addition

STREET ADDRESS

CITY-ST-ZIP

BOWEN, PAT

12 EAST WALL STREET

63 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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 suppliemental 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 of 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 any quactyright with an address.

FILED

Feb 18 1998 8:00am

Secretary of State

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