

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000007034

FILED  
May 06, 2005  
Secretary of State

**Entity Name:** FLORIDA INSTITUTE OF CULTURAL AND ENTERTAINMENT ARTS, INC.

**Current Principal Place of Business:**

629 EXECUTIVE CENTER DR  
SUITE J101  
WEST PALM BEACH, FL 33401 US

**New Principal Place of Business:**

500 N CONGRESS  
SUITE P125  
WEST PALM BEACH, FL 33401 US

**Current Mailing Address:**

629 EXECUTIVE CENTER DR  
J101  
WEST PALM BEACH, FL 33401 US

**New Mailing Address:**

500 N CONGRESS  
SUITE P125  
WEST PALM BEACH, FL 33401 US

**FEI Number:** 65-0800980 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

COLLINS, JOHN M  
629 EXECUTIVE CENTER DRIVE  
#J101  
WEST PALM BEACH, FL 33401 US

**Name and Address of New Registered Agent:**

COLLINS, JOHN M  
500 N CONGRESS  
P125  
WEST PALM BEACH, FL 33401 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

05/06/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: ED ( ) Delete  
Name: COLLINS, JOHN (JC)  
Address: 629 EXECUTIVE CENTER DR STE J-101  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: SD ( ) Delete  
Name: BEARDON, JAMES  
Address: 1200 N FEDERAL HWY SUITE 312  
City-St-Zip: BOCA RATON, FL 33432

Title: TR ( ) Delete  
Name: SCHMAKER, SUAN  
Address: 601 FERN STREET  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: TD (X) Delete  
Name: AUGUSTA, GARY  
Address: 120 GLADES RD  
City-St-Zip: BOCA RATON, FL 33432

Title: BM (X) Delete  
Name: WAYNE, BARTON  
Address: 269 NE 14 STREET  
City-St-Zip: BOCA RATON, FL 33432

Title: BM (X) Delete  
Name: LEWIS, BRUCE  
Address: 120 SOUTH DIXIE SUITE 204  
City-St-Zip: WEST PALM BEACH, FL 33401

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ED (X) Change ( ) Addition  
Name: COLLINS, JOHN (JC)  
Address: 500 N CONGRESS  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: SD (X) Change ( ) Addition  
Name: ABRAHAM, JACQUILIN  
Address: 130 GRANDA ST  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: TR (X) Change ( ) Addition  
Name: GUY, KEN  
Address: 18 SOUX LANE  
City-St-Zip: LANTANA, FL 33462

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN COLLINS

ED

05/06/2005

Electronic Signature of Signing Officer or Director

Date