07281999-90003-049-$61.25-$61.25

FILED
Jul 28, 1999 8:00 am
Secretary of State
07-28-1999 90003 049 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N98000005706

1. Corporation Name

FLORIDA MOTION PICTURE & TELEVISION ASSOCIATION/ GREATER DAYTONA BEACH CHAPTER, INC.

Principal Place of Business	Mailing Address
5414 TURTON LA. PORT ORANGE FL 32127-5584 5548	5414 TURTON LA. PORT ORANGE FL 32127-5584 5548

603075 - 90011 - 48

2. Principal Place of Business 21 SAME AS ABOVE Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country 25	2a. Mailing Address 26 SAME AS ABOVE Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30	3. Date Incorporated or Qualified 10/06/1998 4. FEI Number 59-2301234 ☐ Applied For ☐ Not Applicable 5. Certificate of Status Desired ☐ $8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CARROLL, PAULA A (PRESIDENT) 5414 TURTON LA. PORT ORANGE FL 32127-5584	81 Name: SAME 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 617.1506, 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: Paula A. Carroll DATE: 7-10-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ~~RIC, FERNANDO~~ ~~1332 FAIRWAY AVE~~ ~~CREMONA BEACH FL 32174~~	☐ DELETE Y	1.1 TITLE D 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PAULA A. CARROLL PRESIDENT... 5414 TURTON LANE PORT ORANGE, FL. 32127-5548	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ~~NEISEL, GEORGE~~ ~~3168-G PENINSULA DRIVE~~ ~~DAYTONA BEACH FL 32118~~	☑ DELETE Y	2.1 TITLE D 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	EXP ANDY TURNER 1854 COCO PALMS DR. EDGE WATER, FL. 32141	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSD CARROLL, PAULA A (PRES) 5414 TURTON LANE PORT ORANGE FL 32127	☑ DELETE NO	3.1 TITLE D 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	VP HOWARD GENSER P.O. BOX 1274 DELAND, FL. 32721	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ANDY TURNER (EXP) 1854 COCO PALMS DR. EDGEWATER, FL. 32141	☐ DELETE	4.1 TITLE T 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	PSD SARA PAUL 2050 S. RIDGEWOOD AVE #F4 SOUTH DAYTONA, FL. 32119	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	(V.P) HOWARD GENSER P.O. BOX 1274 DELAND, FL. 32721	☐ DELETE	5.1 TITLE D 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	TD ANDY TURNER 1854 COCOPALM DR. EDGEWATER FL. 32141	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSD SARA PAUL 2050 S. RIDGEWOOD AVE #F4 S. DAYTONA, FL. 32119	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (5/99)

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, with all other like empowered.

SIGNATURE: Paula A. Carroll REQUIRED 7/10/99 (904) 756-2098
SIGNATURE AND TYPED OR PRINTED NAME OF ELECTING OFFICER OR DIRECTOR — Date — Daytime Phone #