

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006056

FILED  
Apr 26, 2004  
Secretary of State

**Entity Name:** SOUTH FLORIDA PERFORMING ARTS FOUNDATION, INC.

**Current Principal Place of Business:**

1307 SE 14TH AVE  
DEERFIELD BEACH, FL 33441

**New Principal Place of Business:**

**Current Mailing Address:**

1307 SE 14TH AVE  
DEERFIELD BEACH, FL 33441

**New Mailing Address:**

**FEI Number:** 65-0870727

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HCRM CORP.  
2200 CORPORATE BLVD NW, STE 401  
BOCA RATON, FL 33431 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: EDD ( ) Delete  
Name: MATHIE, JANET  
Address: 1307 SE 14TH AVE  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: TD ( ) Delete  
Name: BARSKIS, KATHLEEN  
Address: 128 SE 11TH CT  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: SD ( ) Delete  
Name: STIEL, LORYS  
Address: 7824 CUMMINGS LANE  
City-St-Zip: BOCA RATON, FL 33433

Title: PD ( ) Delete  
Name: ENYART, GENE  
Address: 1 ST. CLOUD LANE  
City-St-Zip: BOCA RATON, FL 33431

Title: CD ( ) Delete  
Name: ZUCKERMAN, MARVIN  
Address: 11439 BOCA WOODS LANE  
City-St-Zip: BOCA RATON, FL 33428

Title: VP ( ) Delete  
Name: CHESAL, LENNY  
Address: 1550 SE 14TH CT  
City-St-Zip: DEERFIELD BEACH, FL 33441

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

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

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

Title: SD (X) Change ( ) Addition  
Name: BARSKIS, KATHLEEN  
Address: 128 SE 11TH CT  
City-St-Zip: DEERFIELD BEACH, FL 33441

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: JANET MATHIE

EDD

04/26/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date