

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P19786 (3)
1. Corporation Name
BROADWAY BLUES OF ORLANDO, INC.

Principal Place of Business
4310 OLD MCDONOUGH ROAD
CONLEY GA 30027

Mailing Address
4310 OLD MCDONOUGH ROAD
CONLEY GA 30027

FILED
98 APR 29 PM 3:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 4963 S. Royal Atlanta Dr. Suite, Apt. #, etc. 22 City & State Tucker GA 30084 23 Zip 30084		2a. Mailing Address 26 4963 S. Royal Atlanta Dr. Suite, Apt. #, etc. 27 City & State Tucker GA 30084 28 Zip 39984		3. Date Incorporated or Qualified 06/23/1988 4. FEI Number 58-1570669 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☐ No	
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9. Name and Address of Current Registered Agent

NRAI SERVICES, INC.,
528 E. PARK AVENUE
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	Director/Chairman
NAME	HAUCK, DAVID W.	12 NAME	Hauck, David W.
STREET ADDRESS	4310 OLD MCDONOUGH RD	13 STREET ADDRESS	4963 So. Royal Atlanta Dr.
CITY-ST-ZIP	CONLEY GA	14 CITY-ST-ZIP	Tucker GA 30084
TITLE	EVP	21 TITLE	President
NAME	ORR, KENNETH R.	22 NAME	Orr, Kenneth R.
STREET ADDRESS	4310 OLD MCDONOUGH RD	23 STREET ADDRESS	4963 So. Royal Atlanta Dr.
CITY-ST-ZIP	CONLEY GA	24 CITY-ST-ZIP	Tucker GA 30084
TITLE	S	31 TITLE	VP/S
NAME	SNYDER, GARY E.	32 NAME	Snyder, Gary E.
STREET ADDRESS	4310 OLD MCDONOUGH RD	33 STREET ADDRESS	4963 So. Royal Atlanta Dr.
CITY-ST-ZIP	CONLEY GA	34 CITY-ST-ZIP	Tucker GA 30084
TITLE	CFO	41 TITLE	CFO
NAME	GERADO, ROBERT W.	42 NAME	Gerardo, Robert W.
STREET ADDRESS	4310 OLD MCDONOUGH RD	43 STREET ADDRESS	4963 So. Royal Atlanta Dr.
CITY-ST-ZIP	CONLEY GA	44 CITY-ST-ZIP	Tucker GA 30084
TITLE	C	51 TITLE	C
NAME	OWENS, R. STEVEN	52 NAME	Owens, R. Steven
STREET ADDRESS	4310 OLD MCDONOUGH RD	53 STREET ADDRESS	4963 So. Royal Atlanta Dr.
CITY-ST-ZIP	CONLEY GA	54 CITY-ST-ZIP	Tucker GA 30084
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

4-28-98

Gary E. Snyder, VP/Secretary 404-261-8000

CR2E034 (10/97)