FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997 DOCUMENT #
1. Corporation Name

P40061

Principal Place of Business Mailing Address 6331 HOLLYWOOD BLVD. 8331 HOLLYWOOD BLVD.								
LOS ANGELES	CA 90028	LOS ANGELES CA 9002	1-63 13	3 Date	postporated or Qualified	3a. Date of Last R	loned	
				3. Date	ncorporated or Qualified 08/17/1992	05/01/19	96	
Principal Place of Business The state of Business The state of Business The state of Business of		2a. Mailing Address 26		4. FEI N	umber)5-3739098		oplied For ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certific	cate of Status Desired	\$8.75	Additional adulted	
City & State		City & State		6. Election	on Campaign Financing		May Be	
23		28			Fund Contribution	DebbA D	to Fees	
Zip 24	Country	Zip 29	Country 30		orporation has liability for I	ntanginie tax under s Yes No	. 199.032,	
24	9. Name and Address of Currer		[30]		and Address of New Re			
			81 Name	(8/	me)			
JOHNSON, ROBERT E 100 SOUTH ASHLEY DRIVE			82 Street	Address (P.O. Be	Number is Not Accepted	Bet-		
SUITE 1450			83 C A	ite 35				
TAMPA FL 33602			84 City			85 30	920	
Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida, Such change was authorized.				COMPO	its this statement for the o	FL 33	1s recistered	
agent. La: SIGNATURE	egistered agent, or both, in the State or familiar with, and accept the oblig Signature, typed or printed name of registered ag	gations of, Section 617.0503, F	authorized by the corporida Statutes TE: Registered Agent signature			ot the appointment as	registered	
12.		ND DIRECTORS	13.		ONS/CHANGES TO OFFIC		RS IN 12	
TITLE	PD	DELETE	1.1 TITLE	PD	2 CATE	Change	Addition	
NAME	MUSTARD, CAROLINE	•	1.2 NAME	CORDON	LLYWOOD BLVD).		
STREET ADDRESS	6331 HOLLYWOOD BLVD. Los angeles ca		1.3 STREET ADDRESS	LOS ALIC	ELES, CA 90	va28		
CITY-ST-ZIP TITLE	SD SITURDED ON	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	203 71100	sces just 10	☐ Change	Addition	
NAME	OLSON, FREYA		2.2 NAME)				
STREET ADDRESS	6331 HOLLYWOOD BLVD.		2.3 STREET ADDRESS					
CHY-SI-ZIP	LOS ANGELES CA		2. 4 CITY - ST - ZIP			11 6		
TITLE	td Edwards, Claire	☐ DELETE	3.1 THTLE	Ì		Change	Addition	
NAME STREET ADDRESS	6331 HOLLYWOOD BLVD.		3.2 NAME 3.3 STREET ADDRESS					
CITY-ST-ZIP	LOS ANGELES CA		3.4. CITY-ST-ZIP					
TITLE	200 /1/00220 0//	DELETE	4.1 TITLE			☐ Change	Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS					
CHTY-ST-ZIP			4.4 CITY - ST - ZIP				(7.755	
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition	
NAME arrors approved			5.2 NAME					
STREET ADORESS			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP					
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE	l		Change	☐ Addition	

14. I do 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 changes, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED

May 13 1997 8:00am

Secretary of State