

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

FILED
Sep 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # *P 93000066777*

1. Corporation Name
Take One, Scene One, Inc.

Principal Place of Business	Mailing Address
6914 Thomas Drive Panama City Beach, FL 32408	

2. Principal Place of Business	2a. Mailing Address
21 6914 Thomas Drive	26 P. O. Box 1973
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 Panama City Beach, FL	28 Panama City, FL
Zip	Zip
24 32408	29 32401
Country	Country
25 Bay	30 Bay

3. Date Incorporated or Qualified Sept. 20, 1993	3a. Date of Last Report 1996
4. FEI Number 59-3206760	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

Wynter Byrd
6914 Thomas Drive
Panama City Beach, FL 32408

10. Name and Address of New Registered Agent

81 Name John L. Gioiello, Esq.
82 Street Address (P.O. Box Number is Not Acceptable) 402 Jenks Avenue
83 City Panama City
84 State FL
85 Zip 32401

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 _____ DATE **8-15-97**

12. OFFICERS AND DIRECTORS

TITLE	President	<input checked="" type="checkbox"/> DELETE
NAME	Wynter Byrd	
STREET ADDRESS	6914 Thomas Drive	
CITY-ST-ZIP	Panama City Beach, FL 32408	
TITLE	Secretary/Treasurer	<input checked="" type="checkbox"/> DELETE
NAME	Benja. F. Good	
STREET ADDRESS	6914 Thomas Drive	
CITY-ST-ZIP	Panama City Beach, FL 32408	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	Dave Stalnaker	
13 STREET ADDRESS	415 Harrison Avenue	
14 CITY-ST-ZIP	Panama City, FL 32401	
21 TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	Tammy Stalnaker	
23 STREET ADDRESS	415 Harrison Avenue	
24 CITY-ST-ZIP	Panama City, FL 32401	
31 TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	Wynter Byrd	
33 STREET ADDRESS	6914 Thomas Drive	
34 CITY-ST-ZIP	Panama City, FL 32408	
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	500002290915	
63 STREET ADDRESS	-09/11/97--01103--026	
64 CITY-ST-ZIP	***558.75	

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

SIGNATURE: _____ DATE **20 August 1997**

CR2E034 (9/96)

Raw 9-11-97

804-785-9123