

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000074528 (8)**

1. Corporation Name

ABOUT TIME PRODUCTIONS, INC.



Principal Place of Business

**1001 N HIGHWAY 17-92
WINTER PARK FL 32789**

Mailing Address

**1001 N HIGHWAY 17-92
WINTER PARK FL 32789**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip 24 Country 25

2a. Mailing Address

26 **1001 N. Orlando Ave**

27 Suite, Apt. #, etc.

28 City & State **Winter Park**
29 Zip **32789**
30 Country **FL**

3. Date Incorporated or Qualified

10/06/1994

3a. Date of Last Report

04/27/1995

4. FET Number

59-3276385

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

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**BRYAN, F. WILLIAM II
1001 N HIGHWAY 17-92
WINTER PARK FL 32789**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number Not Acceptable)

1365 Grove Terrace Dr.

84 City

Winter Park

FL

85 Zip Code

32789

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 of Special Agent in Charge, Florida Department of State

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **MCGAMMON, REBECCA**
STREET ADDRESS **1001 N HIGHWAY 17-92**
CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE **D** ☐ DELETE
NAME **BRYAN, F. WILLIAM II**
STREET ADDRESS **1001 N HIGHWAY 17-92**
CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **Rebecca McComman Bryan** ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS **1365 Grove Terrace Dr**
1.4 CITY-ST-ZIP **Winter Park FL 32789**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS **1365 Grove Terrace Dr**
2.4 CITY-ST-ZIP **Winter Park FL 32789**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/96

407 628-4343

Daytime Phone

CR2E034 (12/95)