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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000025953 (6)

FLORIDA OUTDOOR PRODUCTIONS, INC.													
Principa Plac	Mailing Address					I TOURINDA HA 18510 DAIN GUIA WARA KURA KURA	II u kil a iiui	AK MILIM (MIMI MINI	10 14)4 (PP)				
					211 SOUTH BETTY LANE LEARWATER FL 34618-4297								
									 Date Incorporated or Qualified 03/22/1996 	3a. [Date of Last F	leport	
2. Principal P 21	lace of Busi	ness		2a. Mailing Address 26					4. FEI Number 59-3371532			pplied For ot Applicable	
Suito, Apt #, etc				Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75	Additional equired	
City & State				City & State					6. Election Campaign Financing \$5.00 May Be				
Zip Country			2	Zip Co			y		Trust Fund Contribution R This corporation has liability for	intanoibl		to Fees	
24					10			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No					
			of Current Re	10. Name and Address of New Ro	gisterec	i Agent							
	idson, Ro 1 South 1	BETTY LANE		81 Name 62 Street Add			Addre	dress (P.O. Box Number is Not Acceptable)					
CLEARWATER FL 34616						83	1		so (1.0. box nombol is not noopta				
ļ						B4					1		
										FI	L.	Code	
11. Pursuant office or r agent Ta	to the provis egistered ag m familiar w	ions of Sections jent or both, in ith, and accept	s 607.0502 and the State of Fl the obligations	d 607.1508, Flo orida. Such ch s of, Section 60	orida Statutes ange was aut 07.0505, Florid	, the hov thorized by da Steute	e-hamed y the corp s.	corpo ooratio	ration submits this statement for the n's board of directors. I hereby acce	purpose of the ap	of changing i pointment as	ts registered registered	
SIGNATURE	Shorator tono	for priviled name of the	anistend annul and	title il emplicable	(NOTE: F	Innister d An	ent Rignature	regulard	(when reinstating)	DATE			
12. OFFICERS AND					13			ADDITIONS/CHANGES TO OFFI		ID DIRECTOR	RS IN 12		
TII.F					DELETE	1.1 TITLE		P	hood (light)		Change	Addition	
NAME						1.2 NAME			bert L. Davidson 211 South Betty I				
STREET ADDRESS CHY-ST-ZIP									learwater, 31 34	1616			
TITLE		DELET				2.1 TITLE					Change	Addition	
NAME.						2.2 NAME							
STREET ADORESS	5					2.3 STREET ADDRESS							
CITY - ST- ZIF					DELETE	2. 4 CITY-	ST-ZIP	ļ			Change	Addition	
THE NAME				u	DELETE	3.1 TITLE 3.2 NAME]	•	- 4	ET CHAURA	C. Madeletti	
STREET ACIDRESS							t address						
CITY-ST-ZIP						3.4. CITY-		<u> </u>					
THE	.,				DELETE	4.1 TITLE					Change	☐ Addition	
NAME						4. 2 NAME							
STREET ADDRESS							T ADDRESS						
CHY-S1-7IP			· · · · · · · · · · · · · · · · · · ·	["]	DELETE	4.4 CITY - S 5.1 TITLE	51- ZIP	ļ		· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME					_	5.2 NAME		}			· •		
STREET ADDRESS						5.3 STREE	T ADDRESS						
City-St-7.P						5.4 CITY	ST-ZIP	<u> </u>					
TITLE				L	DELETE	61 TITLE					Change	Addition	

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

mobert la Javidson SIGNATURE:

STREET ADDRESS

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 on an attachment with an address. (813) 441-8900

May 01 1997 8:00am

Secretary of State