

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000048987 (7)

1. Corporation Name
FUN IN FINE ARTS, INC.

Principal Place of Business

2205 TIPPERARY CT
ORLANDO FL 32812

Mailing Address

2205 TIPPERARY CT
ORLANDO FL 32812-6882

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

TAYLOR, CONSTANCE G
2205 TIPPERARY CT
ORLANDO FL 32812

3. Date Incorporated or Qualified

06/06/1996

3a. Date of Last Report

4. FEI Number

59-3394985

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

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DIR. - SEC-TREA.
CONSTANCE G. TAYLOR
2205 TIPPERARY CT.
ORLANDO FL 32812

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

CHRMN - PRES. CEO
ROY D. CHAMPION
2205 TIPPERARY CT.
ORLANDO FL 32812

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP

15 CITY-ST-ZIP

16 CITY-ST-ZIP

17 CITY-ST-ZIP

18 CITY-ST-ZIP

19 CITY-ST-ZIP

20 CITY-ST-ZIP

21 CITY-ST-ZIP

22 CITY-ST-ZIP

23 CITY-ST-ZIP

24 CITY-ST-ZIP

25 CITY-ST-ZIP

26 CITY-ST-ZIP

27 CITY-ST-ZIP

28 CITY-ST-ZIP

29 CITY-ST-ZIP

30 CITY-ST-ZIP

31 CITY-ST-ZIP

32 CITY-ST-ZIP

33 CITY-ST-ZIP

34 CITY-ST-ZIP

35 CITY-ST-ZIP

36 CITY-ST-ZIP

37 CITY-ST-ZIP

38 CITY-ST-ZIP

39 CITY-ST-ZIP

40 CITY-ST-ZIP

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.

SIGNATURE

Constance G. Taylor

3-12-97 AM 10-11-97

CR2E034 (9/96)