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

**PROFIT** CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT OF STATE

**FILED** 

Apr 07 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

CITY-ST-70

SIGNATURE

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

DOCUMENT # P96000056501 (5)

TIMELINE PRODUCTIONS, INC.

Principal Place of Business Mailing Address 180 E. LAKE BRANTLEY DR." - 160 E. LAKE BRANTLEY DR. LONGWOOD FL 32779 -LONGWOOD-FL 32779-4807 3. Date Incorporated or Qualified 3a. Date of Last Report 07/01/1996 2. Principal Place of Business 2a. Mailing Address Applied For 353 EILVER PINE 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, X Yes No 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent В1 Name Berman, Jed 180 S. KNOWLES AVE. Street Address (P.O. Box Number is Not Acceptable) WINTER PARK FL 32789 83 84 City 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 96/6) Change Addition TITLE 1.1 TITLE NAMŁ 1.2 NAME STREET ADORESS 1.3 STREET ADDRESS CITY-ST-7:P 1.4 CITY-ST-ZIP HILL 2.1 TITLE Change Addition NALIF 2.2 NAME \$1RECT ADDRESS 2 3 STREET ADDRESS CHY-ST-ZIP 2.4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STHEET ADDRESS 3.3 STREET ADDRESS CITY-ST ZIC 3.4. CITY-ST-ZIP DELETE Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY ST-201 4.4 CITY - ST - ZIP DELETE Addition THILE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE IIILE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST- ZIP 14. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this arrival 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