

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

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000064790 (4)

1. Corporation Name
CADENCE ENTERTAINMENT, INC.

Principal Place of Business

1426 N.W. 25TH TERRACE
GAINESVILLE FL 32605

Mailing Address

1426 N.W. 25TH TERRACE
GAINESVILLE FL 32605

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt #, etc

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt #, etc

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

08/01/1996

4. FEI Number

59-3390444

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 owes or has paid the current year Intangible
Personal Property Tax due June 30

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

CRAWFORD, PATRICIA A
1426 N.W. 25TH TERRACE
GAINESVILLE FL 32605

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 officer, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/>	DELETE
NAME	CRAWFORD, PATRICIA		
STREET ADDRESS	1426 N.W. 25TH TERRACE		
CITY - ST - ZIP	GAINESVILLE FL 32605		

TITLE	D	<input type="checkbox"/>	DELETE
NAME	HENDERSON, GRAHAM		
STREET ADDRESS	18815 LASSEN STREET		
CITY - ST - ZIP	NORTHBRIDGE CA 91324		

TITLE	D	<input checked="" type="checkbox"/>	DELETE
NAME	STEVEN, ARNOLD		
STREET ADDRESS	1178 CROSS CREEK DR		
CITY - ST - ZIP	FRANKLIN TN 37067		

TITLE	D	<input type="checkbox"/>	DELETE
NAME	WALLACE J. CRAWFORD, JR.		
STREET ADDRESS	1426 N.W. 25TH TERRACE		
CITY - ST - ZIP	GAINESVILLE, FLORIDA 32605		

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		<input type="checkbox"/>	Change	<input checked="" type="checkbox"/>	Addition
12 NAME	WALLACE J. CRAWFORD, JR.				
13 STREET ADDRESS	1426 N.W. 25TH TERRACE				
14 CITY - ST - ZIP	GAINESVILLE, FLORIDA 32605				

21 TITLE		<input type="checkbox"/>	Change	<input type="checkbox"/>	Addition
22 NAME					
23 STREET ADDRESS					
24 CITY - ST - ZIP					

31 TITLE		<input type="checkbox"/>	Change	<input type="checkbox"/>	Addition
32 NAME					
33 STREET ADDRESS					
34 CITY - ST - ZIP					

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					
63 STREET ADDRESS					
64 CITY - ST - ZIP					

14. I 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: Patricia A. Crawford, CEO

4/28/98 338-7867

CR2E034 (10/97)