


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

FILED
May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000071516 (4) 1. Corporation Name COUNTRY TIME PICTURE COMPANY			
Principal Place of Business 104 COMMERCE STREET LAKE MARY FL 32748		Mailing Address 104 COMMERCE STREET LAKE MARY FL 32748-6206	
2. Principal Place of Business 21 14506 AMACACT. Suite, Apt. #, etc. 22 City & State 23 ORLANDO, FL Zip 24 32837 25 US		2a. Mailing Address 26 14506 AMACACT. Suite, Apt. #, etc. 27 City & State 28 ORLANDO, FL Zip 29 32837 30 US	
3. Date Incorporated or Qualified 08/26/1996		3a. Date of Last Report	
4. FEI Number 59-3397006		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent MCLEOD, RAYMOND A 48 EAST MAIN STREET APOPKA FL 32703		10. Name and Address of New Registered Agent 81 Name DONALD G. SPROAT, JR. 82 Street Address (P.O. Box Number is Not Acceptable) 14506 AMACACT. 83 84 City ORLANDO FL 85 Zip Code 32837	
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] DATE: 4-29-97 (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS TITLE D NAME SPROAT, DONALD G. JR. STREET ADDRESS 104 COMMERCE STREET CITY-ST-ZIP LAKE MARY FL 32748 [X] DELETE [] DELETE [] DELETE [] DELETE [] DELETE [] DELETE [] DELETE [] DELETE [] DELETE [] DELETE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE D 1.2 NAME SPROAT, DONALD G. JR. 1.3 STREET ADDRESS 14506 AMACACT. 1.4 CITY-ST-ZIP ORLANDO, FL 32837 [X] Change [X] Addition 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP [] Change [] Addition 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP [] Change [] Addition 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP [] Change [] Addition 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP [] Change [] Addition 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP [] Change [] Addition	
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: [Signature] DATE: 4-29-97 DAYTIME PHONE: 407-850-2874 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			



CR2E034 (9/96)