


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P98000014275 1. Corporation Name FAMILY ARTHOUSE PRODUCTIONS, INC.		

Principal Place of Business 19714 RHEA SEE DRIVE LUTZ FL 33548	Mailing Address 19714 RHEA SEE DRIVE LUTZ FL 33548
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 AUG -3 PM 3:30



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
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DO NOT WRITE IN THIS SPACE	
3. Date Incorporated or Qualified 02/12/1998	
4. FEI Number 65-0819046	Applied For <input type="checkbox"/> 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 owes the current year Intangible Personal Property <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent FEDOR, ROBERT 19714 RHEA SEE DRIVE LUTZ FL 33548	
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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 Robert Fedor Signature, typed or printed name of registered agent and title if applicable	DATE 7/22/99 (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
D FEDOR, ROBERT 19714 RHEA SEE DRIVE LUTZ FL 33548	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
D IRISH, TIFFANY 19714 RHEA SEE DRIVE LUTZ FL 33548	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
FEDOR, TIFFANY 19714 RHEA SEE DRIVE LUTZ FL 33548	
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
700002953247--3 -08/06/99--01085--031 *****61.25 *****61.25	
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
700002953247--3 -08/06/99--01085--032 *****88.75 *****88.75	
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
8/8/3	
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Robert Fedor Signature, typed or printed name of registered agent and title if applicable	DATE 7/22/99 (NOTE: Registered Agent signature required when reinstating)

CR2E034 (5/99)

July 22, 1999

Robert Fedor
Family Arthouse Productions, Inc.
19714 Rhea See Drive
Lutz, FL 33548
(813) 949-5374

Mr. Sean Toner
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Mr. Toner,

Per my lengthy discussion with Ms. Heidi McDaniels in the Division of Corporations, I have been instructed to correspond with you regarding waiving the assessment of a \$400.00 late fee for filing my company's annual report.

My company is a small business focusing on Christian, children, and family entertainment. We incorporated for the first time last year. We never received any information or correspondence of any type with regards to annual reports. We had no possible way of knowing what annual report information to complete, send, or where to send it to.

We of course have no problem submitting the annual report fee and corporation supplemental fee and have enclosed two checks for those amounts.

I read in the frequently asked questions section that failure to receive the reports is not an excuse to file late, but seeing that we just incorporated for the first time last year, it is grossly unjust to be penalized \$400.00 for the simple filing of a form we had no idea existed.

With this new information in hand, you can be assured in the future the annual report information and appropriate fees will be mailed in on a timely basis. If there are any questions, please feel free to contact me at the above number.



Robert Fedor
President