

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 01, 1999 8:00 am
Secretary of State

05-01-1999 90089 002 ***150.00

DOCUMENT # P98000063377

1. Corporation Name

DELRAY BEACH FESTIVAL ASSOCIATION, INC.

Principal Place of Business

10 SE 1ST AVE., 2ND FLOOR
DELRAY BCH FL 33444

Mailing Address

10 SE 1ST AVE., 2ND FLOOR
DELRAY BCH FL 33444

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/17/1998

4. FEI Number

65-0882493

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 the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

BORKOSKY, NANCY S
10 SE 1ST AVE., 2ND FLOOR
DELRAY BCH FL 33444

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 D
NAME STEWART-BORKOSKY, NANCY
STREET ADDRESS 227 S. SWINTON AVE.
CITY-ST-ZIP DELRAY BCH FL 33444

DELETE

TITLE D
NAME EVANS, ANNA
STREET ADDRESS 212 KINGS LYNN
CITY-ST-ZIP DELRAY BCH FL 33444

DELETE

TITLE D
NAME RYAN, BERN
STREET ADDRESS 8001 ARLINGTON PLACE
CITY-ST-ZIP W. PALM BCH 33 405

DELETE

TITLE D
NAME KING, JAYNE
STREET ADDRESS 3400 PLACE VALENCAY
CITY-ST-ZIP DELRAY BCH FL 33445

DELETE

TITLE D
NAME SAVAGE, MIKE
STREET ADDRESS 468 NE 30TH ST.
CITY-ST-ZIP BOCA RATON FL 33431

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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, with or without other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-99

Date

561-274-4663

Daytime Phone #

CR2E034 (1/1/98)