2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# 744858

Entity Name: FLAGLER PLAYHOUSE, INC

Current Principal Place of Business:

301 E MOODY BLVD
BUNNELL, FL 32110

New Principal Place of Business:

Current Mailing Address:

301 E MOODY BLVD
BUNNELL, FL 32110

New Mailing Address:

301 E. MOODY BLVD
BUNNELL, FL 32110

FEI Number: 59-1883034 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ELLERTSEN, DIANE
19 CUNNINGHAM LANE
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ELLERTSEN, DIANE
Address: 19 CUNNINGHAM LANE
City-St-Zip: PALM COAST, FL 32137

Title: VP ( ) Delete
Name: ARLOTTA, DIANE
Address: 4021 CALUSA LANE
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP ( ) Delete
Name: BIGELOW, JOHN
Address: 4 FELWOOD LANE
City-St-Zip: PALM COAST, FL 32137

Title: VP ( ) Delete
Name: SBORDONE, JOHN
Address: 2 ROLLING PLACE
City-St-Zip: PALM COAST, FL 32164

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: ELLERTSEN, DIANE
Address: 19 CUNNINGHAM LANE
City-St-Zip: PALM COAST, FL 32137

Title: VP (X) Change ( ) Addition
Name: HOWELL, NANCY
Address: 139 PUTTER DRIVE
City-St-Zip: PALM COAST, FL 32164

Title: VP (X) Change ( ) Addition
Name: SBORDONE, JOHN
Address: 2 ROLLING PLACE
City-St-Zip: PALM COAST, FL 32164

Title: SEC (X) Change ( ) Addition
Name: PAPILLON, KATRINA
Address: 62 ROLLING FERN
City-St-Zip: PALM COAST, FL 32164

Title: TRES ( ) Change (X) Addition
Name: BIGELOW, JOHN
Address: 64 FELLWOOD LANE
City-St-Zip: PALM COAST, FL 32137

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANE ELLERTSEN PRES 04/21/2009

Electronic Signature of Signing Officer or Director — Date