2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 09, 2004
Secretary of State

DOCUMENT# 745188

Entity Name: CREALDE ARTS, INC.

Current Principal Place of Business:

600 ST. ANDREWS BLVD.
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

600 ST. ANDREWS BLVD.
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 59-1887887 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHREYER, PETER
600 ST ANDREWS BLVD
WINTER PARK, FL 32789 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:	TD	( ) Delete
Name:	SCHORNAGLE, III, FRANK	
Address:	10706 SPRINGBUCK TRAIL	
City-St-Zip:	ORLANDO, FL	
Title:	VD	( ) Delete
Name:	CURRY, SALLY	
Address:	1886 ARLINGTON COURT	
City-St-Zip:	LONGWOOD, FL 32779	
Title:	PD	( ) Delete
Name:	SCHORNAGLE, III, FRANK	
Address:	10706 SPRINGBUCK TRAIL	
City-St-Zip:	ORLANDO, FL	
Title:	D	( ) Delete
Name:	SINGHOFEN, PETER J	
Address:	3308 FISHERMAN'S CORE	
City-St-Zip:	WINTER PARK, FL 32792	
Title:	SD	( ) Delete
Name:	BONIFAY, CECELIA	
Address:	255 S. ORANGE AVE	
City-St-Zip:	ORLANDO, FL 32802	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FRANK SCHORNAGLE, III PD 11/09/2004

Electronic Signature of Signing Officer or Director — Date