

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 28, 2004  
Secretary of State**

DOCUMENT# 760016

Entity Name: GULF COAST OPERA COMPANY, INC.

**Current Principal Place of Business:**

5434 ASHTON CIRCLE  
FT. MYERS, FL 33907 US

**New Principal Place of Business:**

4030 FT. ADAMS AVENUE  
LABELLE, FL 33935 US

**Current Mailing Address:**

5434 ASHTON CIRCLE  
FT. MYERS, FL 33907 US

**New Mailing Address:**

4030 FT. ADAMS AVENUE  
LABELLE, FL 33935 US

FEI Number: 59-2126170      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

YARNES, LINDA  
5434 ASHTON CIRCLE  
FT. MYERS, FL 33907 US

**Name and Address of New Registered Agent:**

WILD, SUSAN  
4030 FT. ADAMS AVENUE  
LABELLE, FL 33935 US

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: SUSAN E. WILD      04/28/2004  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: ROBINSON, ROGER  
Address: 1424 SE 14TH TERRACE  
City-St-Zip: CAPE CORAL, FL

Title: PD ( ) Delete  
Name: WILD, SUSAN E  
Address: 4030 FORT ADAMS AVENUE  
City-St-Zip: LABELLE, FL

Title: TD ( ) Delete  
Name: YARNES, LINDA  
Address: 5434 ASHTON CIRCLE  
City-St-Zip: FT. MYERS, FL 33907 US

Title: SD ( ) Delete  
Name: PESCATRICE, MICHELLE  
Address: 2712 S.W. 13TH AVENUE  
City-St-Zip: CAPE CORAL, FL

Title: D ( ) Delete  
Name: YARNES, JAMES M  
Address: 5434 ASHTON CIRCLE  
City-St-Zip: FT. MYERS, FL

Title: D ( ) Delete  
Name: STANCHI, KENNETH P  
Address: 4030 FORT ADAMS AVE.  
City-St-Zip: LABELLE, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VD (X) Change ( ) Addition  
Name: YARNES, JAMES M  
Address: 5434 ASHTON CIRCLE  
City-St-Zip: FT. MYERS, FL 33907 US

Title: PD (X) Change ( ) Addition  
Name: WILD, SUSAN E  
Address: 4030 FORT ADAMS AVENUE  
City-St-Zip: LABELLE, FL 33935 US

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

Title: SD (X) Change ( ) Addition  
Name: STANCHI, KENNETH P  
Address: 4030 FT. ADAMS AVENUE  
City-St-Zip: LABELLE, FL 33935 US

Title: D (X) Change ( ) Addition  
Name: PESCATRICE, MICHELLE  
Address: 2712 SW 13 AVENUE  
City-St-Zip: CAPE CORAL, FL

Title: D (X) Change ( ) Addition  
Name: BALSBAUGH, MAXINE  
Address: 21620 CENTER ST.  
City-St-Zip: ALVA, FL

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: SUSAN E. WILD      PD      04/28/2004  
Electronic Signature of Signing Officer or Director      Date