2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Jan 24, 2003 8:00 am **Secretary of State** DOCUMENT # 768670 01-24-2003 90078 007 ****61.25 1. Entity Name PENSACOLA OPERA, INC. Principal Place of Business Mailing Address 75 TARRAGONA ST P. O. BOX 1790 PENSACOLA FL 32501 PENSACOLA FL 32598-1790 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-2387417 Applied For Not Applicable Zip Country \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RUTLEDGE, WALTER K. Street Address (P.O. Box Number is Not Acceptable) 6560 CHAPEL ST. PENSACOLA FL 32504 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. CD ☐ Delete CR2E037 (10/02) TITLE TITLE ☐ Addition CAVANAUGH, JAN NAME NAME 10446 BEAULIEU LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LILLIAN AL 36549 CITY-ST-ZIP **⊠**Addition TITLE ☐ Change TITLE Delete BUCHANAN-WRIGHT, PATRICIA BOWYER, ANNMARIE NAME POBOX 30015 5808 EAST BAY BLVD STREET ADDRESS STREET ADDRESS PENSACOIA, A 32503 CITY-ST-ZIP **GULF BREEZE FL 32563** CITY-ST-ZIP ☐ Change TITLE Delete TITLE bues, Ms. Julie L. Esq. 3809 Creighton Rd. EISER, MICHAEL F NAME NAME 392 PALM LAKE DR STREET ADDRESS STREET ADDRESS PENSACOIA, FI 32504 CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32507 ☐ Delete TITLE TITLE SHERRIE, MITCHELL H NAME NAME 4603 BAYDROOK DR 8680 Scenie Hwy #20 4603 BAYNROOK DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 32598-1790 CITY-ST-ZIP Addition ☐ Delete TITLE TITLE BUJNOSKI, JOANNE L NAME NAME STREET ADDRESS 8860 SCENIC HWY #20 STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 32514 CITY-ST-ZIP BD Delete Change ☐ Addition TITLE TITLE MEEKS-MULLET, RITA NAME NAME 1318 SOUNDVIEW TRAIL STREET ADDRESS STREET ADDRESS

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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

PENSACOLA BEACH FL 32561

CITY-ST-ZIP

FILED