

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000984

FILED
Apr 20, 2009
Secretary of State

Entity Name: ORMOND BEACH PERFORMING ARTS CENTER SHOW CLUB, INC.

Current Principal Place of Business:

399 NORTH US 1
ORMOND BEACH, FL 321745209

New Principal Place of Business:

399 NORTH US 1
ORMOND BEACH, FL 321745209 US

Current Mailing Address:

C/O STEFAN SIBLEY
399 NORTH US 1
ORMOND BEACH, FL 32174

New Mailing Address:

399 NORTH US 1
ORMOND BEACH, FL 321745209 US

FEI Number: 59-3699505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OVER, JANET A PRES.
399 NORTH US 1
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

OVER, JANET A PRES.
231 RIVERSIDE DRIVE
2306
HOLLY HILL, FL 32117 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:

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: CONNOR, PAM
Address: 1010 JOHN ANDERSON
City-St-Zip: ORMOND BEACH, FL 32176

Title: TREA () Delete
Name: ORRIS, MICHAEL
Address: 35 BEAR CREEK PATH
City-St-Zip: ORMOND BEACH, FL 32174

Title: SECR () Delete
Name: KNAPP, JOAN
Address: 2800 N. ATLANTIC 31112
City-St-Zip: DAYTONA BEACH, FL 32176

Title: D () Delete
Name: DURKIN, GEORGE
Address: 20 MEADOW BROOK LANE
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Delete
Name: MCCAMLAY, MARTIN
Address: 1010 JOHN ANDERSON
City-St-Zip: ORMOND BEACH, FL 32174

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

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: D (X) Change () Addition
Name: MOELLER, RALPH
Address: 215 BELLEVUE AVE
City-St-Zip: DAYTONA BEACH, FL 32117

Title: D (X) Change () Addition
Name: BIGELOW, WENDY
Address: 1025 HAMPSTEAD LANE
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Change (X) Addition
Name: DONOVAN, MARGO
Address: 12 SEA DRIFT TERRACE
City-St-Zip: ORMOND BEACH, FL 32176

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: JANET A. OVER

PRES

04/20/2009

Electronic Signature of Signing Officer or Director

Date