2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05231

FILED Mar 16, 2009 Secretary of State

Entity Name: MOUNT DORA CENTER FOR THE ARTS, INC.

Current Principal Place of Business: New Principal Place of Business:

138 E 5TH AVENUE MT. DORA, FL 32757

Current Mailing Address: New Mailing Address:

138 E 5TH AVENUE MT. DORA, FL 32757

FEI Number: 59-2470958 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ALDERMAN, MICHELE M
138 E. 5TH AVE
DURIAS, KRISTINE M
138 E. 5TH AVE

MOUNT DORA, FL 32757 US MOUNT DORA, FL 32757 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: KRISTINE M DURIAS 03/16/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S () Delete Title: VP (X) Change () Addition Name: MIDDLETON, MICHELL Name: MIDDLETON, MICHELL

 Address:
 2065 MORRIS STREET
 Address:
 2065 MORRIS STREET

 City-St-Zip:
 EUSTIS, FL 32726
 City-St-Zip:
 EUSTIS, FL 32726

Title: VP () Delete Title: P (X) Change () Addition Name: DURIAS, KRISTINE P URIAS, KRISTINE

Address: 1207 MARSHALL COURT Address: 1207 MARSHALL COURT
City-St-Zip: EUSTIS, FL 32726 City-St-Zip: EUSTIS, FL 32726

Title: T () Delete Title: () Change () Addition

 Name:
 STONER, KIM
 Name:

 Address:
 1970 HILLSIDE DRIVE
 Address:

 City-St-Zip:
 MOUNT DORA, FL 32757
 City-St-Zip:

Title: P () Delete Title: S (X) Change () Addition

Name:ALDERMAN, MICHELE MName:BUSBY, ANGELIAAddress:P.O. BOX 416Address:25547 PINE VALLEY DRIVECity-St-Zip:TANGERINE, FL 32777City-St-Zip:SORRENTO, FL 32776

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: KRISTINE M DURIAS P 03/16/2009