

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V45572

FILED  
Jul 14, 2004  
Secretary of State

**Entity Name:** UNIVERSITY PERFORMING ARTS CENTRE, INC.

**Current Principal Place of Business:**

160 ALEXANDRIA BLVD  
OVIEDO, FL 32765 US

**New Principal Place of Business:**

**Current Mailing Address:**

160 ALEXANDRIA BLVD  
OVIEDO, FL 32765 US

**New Mailing Address:**

592 WEST PALM VALLEY DR  
OVIEDO, FL 32765 US

FEI Number: 59-3153768

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HUMPHRIES, J. GREGORY  
300 SOUTH ORANGE AVENUE  
SUITE 100  
ORLANDO, FL 328013373 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTS ( ) Delete  
Name: FREED-SIEGFRIED, JUDI  
Address: 160 ALEXANDRIA BLVD  
City-St-Zip: OVIEDO, FL 32765

Title: V ( ) Delete  
Name: SIEGFRIED, KEVIN  
Address: 160 ALEXANDRIA BLVD  
City-St-Zip: OVIEDO, FL 32765

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEVIN SIEGFRIED

V

07/14/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date