**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**
**Mar 25, 2014**
**Secretary of State**
**CC6532263816**

DOCUMENT# N09000005774

**Entity Name:** FLORIDA OPERA THEATRE, INC.

**Current Principal Place of Business:**

210 PINE CONE LANE
LONGWOOD, FL 32779

**Current Mailing Address:**

P.O. BOX 547937
ORLANDO, FL 32854-7937 US

**FEI Number: 27-0406958**

**Certificate of Status Desired:** No

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

THOMPSON, JUDITH H
210 PINE CONE LANE
LONGWOOD, FL 32779 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:

Electronic Signature of Registered Agent — Date

**Officer/Director Detail :**

| | |
|---|---|
| Title | S |
| Name | MEIJER, CAROL |
| Address | 766 PENNSYLVANIA AVE |
| City-State-Zip: | WINTER PARK FL 32789 |

| | |
|---|---|
| Title | S |
| Name | FOX, ANN C |
| Address | 3936 BAYVIEW DRIVE |
| City-State-Zip: | ORLANDO FL 32806 |

| | |
|---|---|
| Title | P |
| Name | LEE, JUDITH |
| Address | 12 BARNARD COURT |
| City-State-Zip: | MAITLAND FL 32751 |

| | |
|---|---|
| Title | CHAIRMAN, ATISTIC ADVISORY COMMITTEE |
| Name | MILLER, KATHY |
| Address | 2203 VIA TUSCANY |
| City-State-Zip: | WINTER PARK FL 32789 |

| | |
|---|---|
| Title | V |
| Name | WILKES, RITA |
| Address | 1811 WYCLIFF DRIVE |
| City-State-Zip: | ORLANDO FL 32803 |

| | |
|---|---|
| Title | V |
| Name | HANCOCK, BEATRICE |
| Address | 1520 DELANEY AVENUE |
| City-State-Zip: | ORLANDO FL 32806 |

| | |
|---|---|
| Title | T |
| Name | THOMPSON, JUDITH H |
| Address | 210 PINE CONE LANE |
| City-State-Zip: | LONGWOOD FL 32779 |

*I hereby 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 all other like empowered.*

SIGNATURE: JUDITH H. THOMPSON T 03/25/2014

Electronic Signature of Signing Officer/Director Detail — Date