

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704671

FILED
Mar 14, 2011
Secretary of State

Entity Name: OSCEOLA CENTER FOR THE ARTS, INC.

Current Principal Place of Business:

2411 E IRLO BRONSON MEMORIAL HWY
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

2411 E IRLO BRONSON MEMORIAL HWY
KISSIMMEE, FL 34744

New Mailing Address:

FEI Number: 59-6179937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOORE, EDWARD A
2411 E IRLO BRONSON HWY
KISSIMMEE, FL 34744 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: JOHNSTON, NAN
Address: 196 VENTANA.
City-St-Zip: POINCIANA, FL 34759

Title: VP
Name: PACE, PETE
Address: 5365 CANOE CREEK ROAD
City-St-Zip: ST. CLOUD, FL 34772

Title: D
Name: TOMPKINS, MARCIA
Address: 1731 OLD BOGGY CREEK ROAD
City-St-Zip: KISSIMMEE, FL 34743

Title: D
Name: LOUBIER, DAN
Address: 2625 HILLIARD CT
City-St-Zip: KISSIMMEE, FL 34744

Title: D
Name: WHITE, TOM
Address: 6136 WATERFIELD WAY
City-St-Zip: ST. CLOUD, FL 34771

Title: D
Name: SCOTT, CAROLYN
Address: 1701 W. CARROLL ST.
City-St-Zip: KISSIMMEE, FL 34741

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: EDWARD A. MOORE

EXEC

03/14/2011

Electronic Signature of Signing Officer or Director

Date