2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008
Secretary of State

DOCUMENT# 722966

Entity Name: MONTICELLO OPERA HOUSE, INC.

Current Principal Place of Business:

185 W. WASHINGTON
MONTICELLO, FL 32344 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 518
MONTICELLO, FL 32345 US

New Mailing Address:

FEI Number: 59-1400288 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, GEORGE W
240 W. WASHINGTON ST.
MONTICELLO, FL 32344 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: D ( ) Delete
Name: HAWKINS, ELENOR
Address: P. O. BOX 507
City-St-Zip: MONTICELLO, FL 32345

Title: CD ( ) Delete
Name: WILLIAMS, JACK
Address: 420 TINDELL RD.
City-St-Zip: MONTICELLO, FL 32344

Title: VCD ( ) Delete
Name: FRISBY, MARY ANN,
Address: P. O. BOX 1161
City-St-Zip: MONTICELLO, FL 32345

Title: D ( ) Delete
Name: WARD, DAVID
Address: P. O. BOX 616
City-St-Zip: MONTICELLO, FL 32345

Title: D ( ) Delete
Name: CULBREATH, BARBARA
Address: 692 WESTERLEA PL
City-St-Zip: MONTICELLO, FL 32344

Title: SD ( ) Delete
Name: REICHMAN, MICHAEL
Address: 2219 OLD LLOYD RD.
City-St-Zip: MONTICELLO, FL 32344

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition
Name: HAWKINS, ELENOR
Address: P. O. BOX 507
City-St-Zip: MONTICELLO, FL 32345

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: FRISBY, MARY ANN,
Address: P. O. BOX 1161
City-St-Zip: MONTICELLO, FL 32345

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VCD (X) Change ( ) Addition
Name: VOGELGESANG, DENISE
Address: 375 QUAIL TRAIL
City-St-Zip: MONTICELLO, FL 32344

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: JAN RICKEY ED 04/21/2008

Electronic Signature of Signing Officer or Director — Date