

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745188

FILED
Apr 30, 2009
Secretary of State

Entity Name: CREALDE ARTS, INC.

Current Principal Place of Business:

600 ST. ANDREWS BLVD.
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

600 ST. ANDREWS BLVD.
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 59-1887887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHREYER, PETER
600 ST ANDREWS BLVD
WINTER PARK, FL 32789 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: PD () Delete
Name: MCLEOD, DAVID
Address: 261 DETMAR DRIVE
City-St-Zip: WINTER PARK, FL 32789

Title: VD () Delete
Name: LANCASTER, PATRICIA
Address: 512 CLARENDON AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: TD () Delete
Name: LACY, WAYNE
Address: 1009 ELMWOOD STREET
City-St-Zip: ORLANDO, FL 32801

Title: SD () Delete
Name: KOEGEL, REBECCA
Address: 821 ELLWOOD AVENUE
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: PETER SCHREYER

RA

04/30/2009

Electronic Signature of Signing Officer or Director

Date