

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763790

FILED
Apr 16, 2009
Secretary of State

Entity Name: THE RAYMOND F. KRAVIS CENTER FOR THE PERFORMING ARTS, INC.

Current Principal Place of Business:

701 OKEECHOBEE BLVD.
W PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

701 OKEECHOBEE BLVD.
W PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 59-2245054

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOYLE, JON
625 NORTH FLAGLER DR.
WEST PALM BEACH, FL 33401 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: LTRS () Delete
Name: GOODMAN, JUDITH
Address: ONE NORTH CLEMATIS STREET
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: DREYFOOS, ALEXANDER W JR
Address: 529 SOUTH FLAGLER DRIVE
City-St-Zip: WEST PALM BEACH, FL 33401

Title: LTRS () Delete
Name: MICHEL, GEORGE J JR.
Address: 310 MEDITERRANEAN RD.
City-St-Zip: PALM BEACH, FL 33480

Title: LTRS () Delete
Name: PUDE, ROBERT S
Address: 184 BRADELY PLACE, #202
City-St-Zip: PALM BEACH, FL 33480

Title: CEO () Delete
Name: MITCHELL, JUDITH
Address: 701 OKEECHOBEE BLVD.
City-St-Zip: WEST PALM BEACH, FL 33401

Title: CFO () Delete
Name: ROBERTS-RUGE, KYLE
Address: 701 OKEECHOBEE BLVD.
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: MEYER, WILLIAM A
Address: 1601 BELVEDERE ROAD
City-St-Zip: WEST PALM BEACH, FL 33401

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

Title: VCD (X) Change () Addition
Name: KHOURY, AMIN
Address: 1400 CORPORATE CENTER WAY
City-St-Zip: WELLINGTON, FL 33414

Title: VCD (X) Change () Addition
Name: FLAMM, ALEC
Address: 2000 S OCEAN BLVD.
City-St-Zip: PALM BEACH, FL 33480

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: KYLE ROBERTS RUGE

CFO

04/16/2009

Electronic Signature of Signing Officer or Director

Date