2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005879

Entity Name: PALM BEACH DRAMAWORKS, INC.

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 322 BANYAN BOULEVARD W PALM BEACH, FL 33401 **Current Mailing Address: New Mailing Address:** 322 BANYAN BOULEVARD W PALM BEACH, FL 33401 FEI Number: 65-1040048 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HAYES, WILLIAM L 8584 BÉACONHILL ROAD PALM BEACH GARDENS, FL 33410 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HAYES, WILLIAM L Name: Name: 8584 BEACONHILL ROAD Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 US City-St-Zip: Title: () Delete Title: () Change () Addition GHERIDIAN, Y. NANIG Name: Name: Address: 1020 B GREEN PINE BLVD. Address: City-St-Zip: W PALM BEACH, FL 33409 City-St-Zip: Title: () Delete Title: () Change () Addition BERYL, SUE ELLEN Name: Name: 8584 BEACONHILL RD. Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: Title: () Delete Title: () Change () Addition PLOTSKY, CHARLOTTE Name: Name: 380 KELSEY PARK DRIVE Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: Title: () Delete Title: (X) Change () Addition O'NEILL, JOHN D WALTON, ELIZABETH Name: Name: 44 COCOANUT ROW SUITE #M202 7210 CLARKE ROAD Address: Address: City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: LAKE CLARKE SHORES, FL 33406 Title: () Delete Title: () Change (X) Addition PERLBERG, MARK Name: Name: Address: Address: 302 VIZCAYA DRIVE

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.

City-St-Zip:

SIGNATURE: SUE ELLEN BERYL D 04/23/2009

City-St-Zip:

PALM BEACH GARDENS, FL 33418