2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005360

Entity Name: PANHANDLE COMMUNITY THEATRE, INC.

FILED Jaņ 15, 2<u>00</u>8 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6866 CAROLINE STREET MILTON, FL 32570

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 278 MILTON, FL 32570

FEI Number: 33-1015852 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:

KETTNER, CHRISTINA A MONSON, ROBERT W JR. 5320 CASPER CIRLCE 7500 CORRAL ROAD MILTON, FL 32570 MILTON, FL 32583

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: ROBERT W. MONSON, JR. 01/15/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

READY, RICK MONSON, ROBERT W JR Name: Name: 4628 MAGNOLIA HILL COURT Address: 7500 CORRAL ROAD Address: City-St-Zip: PACE, FL 32571 City-St-Zip: MILTON, FL 32583

Title: () Delete Title:

(X) Change () Addition MONSON, BOB Name: SUTTON, LAUREN Name:

Address: 7500 CORRAL ROAD Address: 6932 PINE BLOSSOM ROAD City-St-Zip: MILTON, FL 32583 City-St-Zip: MILTON, FL 32570

Title: () Delete Title: (X) Change () Addition KETTNER, CHRISTINA A Name: MITCHELL, JANE Name:

5320 CASPER CIRCLE Address: Address: 6453 BASS LANE City-St-Zip: MILTON, FL 32570 City-St-Zip: MILTON, FL 32570

Title: () Delete Title: (X) Change () Addition

Name: AUSTIN, ELISA F Name: KETTNER, CHRISTINA A 2617 SAN CLEMENTE DRIVE 5320 CASPER CIRCLE Address: Address: City-St-Zip: MILTON, FL 32583 City-St-Zip: MILTON, FL 32570

Title: (X) Delete Title: () Change () Addition

READY, GAIL Name: Name: 4628 MAGNOLIA HILL COURT Address: Address: PACE, FL 32571 City-St-Zip: 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: ROBERT W. MONSON, JR. **PRES** 01/15/2008