2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2009
Secretary of State

DOCUMENT# N02000005360

Entity Name: PANHANDLE COMMUNITY THEATRE, INC.

Current Principal Place of Business:

6866 CAROLINE STREET
MILTON, FL 32570

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 278
MILTON, FL 32570

New Mailing Address:

FEI Number: 33-1015852 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MONSON, ROBERT W JR.
7500 CORRAL ROAD
MILTON, FL 32583 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: P ( ) Delete
Name: MONSON, ROBERT W JR
Address: 7500 CORRAL ROAD
City-St-Zip: MILTON, FL 32583

Title: VP ( ) Delete
Name: SUTTON, LAUREN
Address: 6932 PINE BLOSSOM ROAD
City-St-Zip: MILTON, FL 32570

Title: T ( ) Delete
Name: MITCHELL, JANE
Address: 6453 BASS LANE
City-St-Zip: MILTON, FL 32570

Title: S ( ) Delete
Name: KETTNER, CHRISTINA A
Address: 5320 CASPER CIRCLE
City-St-Zip: MILTON, FL 32570

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SEC (X) Change ( ) Addition
Name: SUTTON, LAUREN
Address: 6932 PINE BLOSSOM ROAD
City-St-Zip: MILTON, FL 32570

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

Title: TD (X) Change ( ) Addition
Name: STUBBLEFIELD, BOB
Address: 4048 JACARANDA TRACE
City-St-Zip: MILTON, FL 32583

Title: VP ( ) Change (X) Addition
Name: COOK, DAVID R
Address: 4450 VERN COVE
City-St-Zip: PACE, FL 32571

Title: PR ( ) Change (X) Addition
Name: COPE, JAY
Address: 4407 DANDY DRIVE
City-St-Zip: PACE, FL 32571

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 01/20/2009

Electronic Signature of Signing Officer or Director — Date