

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009166

FILED  
Jan 08, 2009  
Secretary of State

**Entity Name:** GEORGE PATRICK HENRY PRODUCTIONS, INC.

**Current Principal Place of Business:**

1632 CROSSVINE CT  
NEW PORT RICHEY, FL 34655

**New Principal Place of Business:**

**Current Mailing Address:**

1632 CROSSVINE CT  
NEW PORT RICHEY, FL 34655

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SYCZ, JAN  
1632 CROSSVINE CT  
NEW PORT RICHEY, FL 34655 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: S ( ) Delete  
Name: COX, ADRIAN  
Address: 1812 PINE STREET  
City-St-Zip: VALRICO, FL 33594

Title: T ( ) Delete  
Name: PASEK, MICHAEL D  
Address: 4851 85TH AVENUE  
City-St-Zip: PINELLAS PARK, FL 33781

Title: P ( ) Delete  
Name: SYCZ, JAN  
Address: 1632 CROSSVINE CT.  
City-St-Zip: NEW PORT RICHEY, FL 34655

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: P (X) Change ( ) Addition  
Name: SYCZ, JAN  
Address: 1632 CROSSVINE CT  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D ( ) Change (X) Addition  
Name: SYCZ, MALGORZATA A  
Address: 1632 CROSSVINE CT  
City-St-Zip: NEW PORT RICHEY, FL 34655

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: JAN SYCZ

P

01/08/2009

Electronic Signature of Signing Officer or Director

Date