2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2008
Secretary of State

DOCUMENT# N03000006743

Entity Name: OPERA JACKSONVILLE, INC.

Current Principal Place of Business:

1714 WATERFORD LANDING DR.
ORANGE PARK, FL 32003

New Principal Place of Business:

Current Mailing Address:

1714 WATERFORD LANDING DR.
ORANGE PARK, FL 32003

New Mailing Address:

FEI Number: 43-2032363 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEWIS, SONIA
1714 WATERFORD LANDING DR.
ORANGE PARK, FL 32003 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: LEWIS, SONIA
Address: 1714 WATERFORD LANDING DR.
City-St-Zip: ORANGE PARK, FL 32003

Title: T ( ) Delete
Name: CLABORN, VICKY
Address: 1486 WINSTON LANE
City-St-Zip: ORANGE PARK, FL 32003

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: GD (X) Change ( ) Addition
Name: LEWIS, SONIA
Address: 1714 WATERFORD LANDING DRIVE
City-St-Zip: FLEMING ISLAND (ORANGE PARK), FL 32003

Title: PRES (X) Change ( ) Addition
Name: GRANFIELD, CHRISTINE MD
Address: 4463 WORTH DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32207

Title: V P ( ) Change (X) Addition
Name: FRILLING, LESLIE
Address: 1223 PALM DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: TREA ( ) Change (X) Addition
Name: JARVIS, WALTER
Address: 35 HIALEAH DRIVE
City-St-Zip: ORANGE PARK, FL 32257

Title: SEC ( ) Change (X) Addition
Name: CROMLEY, KATHERINE
Address: 1502 EIGHTH ST S
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: SONIA LEWIS GD 03/25/2008

Electronic Signature of Signing Officer or Director — Date