

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008246

FILED  
Feb 24, 2012  
Secretary of State

**Entity Name:** DR. PHILLIPS CENTER FOR THE PERFORMING ARTS, INC.

**Current Principal Place of Business:**

455 SOUTH ORANGE AVENUE  
SUITE 410  
ORLANDO, FL 32801

**New Principal Place of Business:**

455 SOUTH ORANGE AVENUE  
SUITE 700  
ORLANDO, FL 32801

**Current Mailing Address:**

455 SOUTH ORANGE AVENUE  
SUITE 410  
ORLANDO, FL 32801

**New Mailing Address:**

455 SOUTH ORANGE AVENUE  
SUITE 700  
ORLANDO, FL 32801

FEI Number: 20-0695917

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PUGH, JAMES H JR  
359 CAROLINA AVENUE  
WINTER PARK, FL 32789 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: DC  
Name: PUGH, JAMES H JR  
Address: 359 CAROLINA AVENUE  
City-St-Zip: WINTER PARK, FL 32789

Title: D,S  
Name: BORNSTEIN, RITA  
Address: 1110 W. IVANHOE BLVD., APT. 4  
City-St-Zip: ORLANDO, FL 32804

Title: D, T  
Name: TIMBERLAKE, EDMUND C JR.  
Address: 700 WEST MORSE BLVD., SUITE 100  
City-St-Zip: WINTER PARK, FL 32789

Title: D,P  
Name: KATHERINE, RAMSBERGER  
Address: 455 SOUTH ORANGE AVENUE, SUITE 700  
City-St-Zip: ORLANDO, FL 32801

I hereby 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 all other like empowered.

SIGNATURE: KATHERINE RAMSBERGER

PRES

02/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date