

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009933

FILED  
Mar 11, 2009  
Secretary of State

Entity Name: ACADEMY FOR THE PERFORMING ARTS, INC.

## Current Principal Place of Business:

1901 23 ST  
ROOM 219  
VERO BEACH, FL 32960

## New Principal Place of Business:

## Current Mailing Address:

1901 23 ST  
VERO BEACH, FL 32960

## New Mailing Address:

1901 23 ST  
ROOM 219  
VERO BEACH, FL 32960

FEI Number: 41-2108806

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MILLER, GARY  
1901 23 ST  
VERO BEACH, FL 32960 US

## Name and Address of New Registered Agent:

MILLER, GARY  
8600 BUTTERFLY LN SW  
VERO BEACH, FL 32968 US

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:

03/11/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: MILLER, GARY  
Address: 865 19TH ST SW  
City-St-Zip: VERO BEACH, FL 32962

Title: DS ( ) Delete  
Name: COMPTON, ART  
Address: 163 RICHARD ST.  
City-St-Zip: SEBASTIAN, FL 32958

Title: DT ( ) Delete  
Name: PAUL, JOHN D DR.  
Address: 505 NORTH A1A, #8-5  
City-St-Zip: FT PIERCE, FL 34949

Title: DS ( ) Delete  
Name: TUCKER, SHEILA  
Address: 127 PRESTWICK CIRCLE  
City-St-Zip: VERO BEACH, FL 32967

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DT (X) Change ( ) Addition  
Name: CARTER, JUDY  
Address: 6220 69TH ST  
City-St-Zip: VERO BEACH, FL 32967

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: GARY MILLER

DP

03/11/2009

Electronic Signature of Signing Officer or Director

Date