

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008304

FILED
Apr 25, 2006
Secretary of State

Entity Name: THE OFF STREET PLAYERS REPERTORY, INCORPORATED

Current Principal Place of Business:

1511 PINE STREET
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

1511 PINE STREET
TALLAHASSEE, FL 32303

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:

VAUGHT, PAMELA
1511 PINE STREET
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

VAUGHT, PAMELA G
1511 PINE STREET
TALLAHASSEE, FL 32303 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: PAMELA G. VAUGHT

04/25/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: EAD () Delete
Name: VAUGHT, PAMELA G
Address: 1511 PINE STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: TD () Delete
Name: TOWNSEND, WILLIAM
Address: 1511 PINE STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete
Name: STUART, ROBERT
Address: 1511 PINE STREET
City-St-Zip: TALLAHASSEE, FL 32303

Title: D (X) Delete
Name: VAUGHT, CARRIE
Address: 1511 PINE STREET
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: VAUGHT, CARRIE
Address: 1511 PINE STREET
City-St-Zip: TALLAHASSEE, FL 32303

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: PAMELA G. VAUGHT

EAD

04/25/2006

Electronic Signature of Signing Officer or Director

Date