2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N05000002500

Entity Name: PALM BEACH THEATER GUILD, INC.

Current Principal Place of Business:

214 BRAZILIAN AVE #260
PALM BEACH, FL 33450

New Principal Place of Business:

Current Mailing Address:

PO BOX 667
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 20-2559546 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SLATER, ROBERT W
214 BRAZILIAN AVE #260
PALM BEACH, FL 33450 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: D ( ) Delete
Name: FLYNN, PATRICK H
Address: PO BOX 2354
City-St-Zip: PALM BEACH, FL 33480

Title: D ( ) Delete
Name: FLYNN, FLORENCE E
Address: 2600 N FLAGLER DR #804
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D ( ) Delete
Name: GUEST, HELEN S
Address: 152 WELLS ROAD
City-St-Zip: PALM BEACH, FL 33480

Title: D ( ) Delete
Name: SCHUMACHER, AMANDA
Address: 1077 PORTAGE
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: PATRICK HENRY FLYNN PRES 04/28/2009

Electronic Signature of Signing Officer or Director — Date