2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# N05000007340

Entity Name: THE SOCIETY OF THE NORTH PORT PERFORMING ARTS CENTER, INC.

Current Principal Place of Business:

C/O NORTH PORT HIGH SCHOOL
6400 W. PRICE BLVD
NORTH PORT, FL 34291

New Principal Place of Business:

Current Mailing Address:

C/O NORTH PORT HIGH SCHOOL
6400 W. PRICE BLVD
NORTH PORT, FL 34291

New Mailing Address:

C/O NORTH PORT HIGH SCHOOL
6400 W. PRICE BLVD - C/O BOX OFFICE
NORTH PORT, FL 34291

FEI Number: 55-0902582 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THIELE, JAMES
4601 MACCAUGHEY DR
NORTH PORT, FL 34287 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: CD ( ) Delete
Name: THIELE, JAMES
Address: 4601 MACCAUGHEY DR
City-St-Zip: NORTH PORT, FL 34287

Title: VD ( ) Delete
Name: SUNDEEN, MINA
Address: 4089 FAIRWAY DR
City-St-Zip: NORTH PORT, FL 34287

Title: SD ( ) Delete
Name: SCHEIL, JUDY
Address: 4601 MACCAUGHEY DR
City-St-Zip: NORTH PORT, FL 34287

Title: TD ( ) Delete
Name: GROSS, RICHARD
Address: 6468 SAFFORD TERR
City-St-Zip: NORTH PORT, FL 34287

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: RICHARD GROSS TD 01/14/2009
Electronic Signature of Signing Officer or Director — Date