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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: NORTH PORT HI	GH SCHOOL THEATRE	GUILD INC
DOCUMENT NUM	N05000010465		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Stephanie Boynton		
		Name of Contact Person	1
	NORTH PORT HIGH SCHO	OOL THEATRE GUILD IN	IC
		Firm/ Company	
	6400 W Price Blvd		
		Address	
	North Port, FL 34291		
		City/ State and Zip Code	2
inpthe	E-mail address: (to be us	Heatreguildeg	mail. Com notification)
For further informatio	n concerning this matter, pleas	se call:	
Stephanie Boynton		941 at () 445-7229
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
<u>Mai</u>	iling Address	Street .	Address
	endment Section		ment Section
	sion of Corporations		n of Corporations
	Box 6327		Building
Fall	ahassee, FL 32314	2661 E	xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



NORTH PORT HIGH SCHOOL THEATRE GUILD INC

16 JAN 25 PM 3: 09

(Name o	of Corporation as curre	ntly filed with the Florida Dept of State of Control
N05000010465		TALLAHASSEE FLORIDA
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:	
N/A		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
D. Frater server arizoinal office address	if applicables	N/A
B. Enter new principal office address, (Principal office address MUST BE A S		
C. Enter new mailing address, if appli		N/A
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	IVA
D. If amending the registered agent an new registered agent and/or the nev		ldress in Florida, enter the name of the
·	Stephanie Boynton	
Name of New Registered Agent	6400 W Price Blvd.	
		street address)
	North Port	34291
New Registered Office Address:		(City) , Florida(Zip Code)
		(enj)
New Registered Agent's Signature, if c		
I hereby accept the appointment as regist	ered agent. I am familia	r with and accept the obligations of the position.
	L W	
- 0+	Signature of New	₽-Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	Cheri Lee	6400 W Price Blvd.
Add			North Port, FL 34291
X Remove			,,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
Change	<u>s</u>	Kim Neville	6400 W Price Blvd.
Add			North Port, FL 34291
X Remove			
3) X Change	P	Stephanie Boynton	6400 W Price Blvd
Add			North Port, FL 34291
Remove			
4) X Change	VP	Jaime Ledoux	6400 W Price Blvd
Add			North Port, FL 34291
Remove			
5) Change	s	Lana Owens	6400 W Price Blvd
X Add			North Port, FL 34291
Remove			
6) Change	Т	Kim Clouden	6400 W Price Blvd
X Add			North Port, FL 34291
Remove			

r ni.	lditional sheets, if necessary). (Be specific)	
'A		
	A 1884 - 1894 - 1894 - 1894 - 1894 - 1894 - 1894 - 1894 - 1894 - 1894 - 1894 - 1894 - 1894 - 1894 - 1894 - 1894	.,
		· · · · · · · · · · · · · · · · · · ·
lf an an	endment provides for an exchange, reclassification, or cancellation of issue	<u>d shares,</u>
provisi (if	ns for implementing the amendment if not contained in the amendment its of applicable, indicate N/A)	<u>e11:</u>
4	si application, material 1971)	
,		

The date of each amendmen		, if other than the
date this document was signed	06/01/2015	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this che Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	re adopted by the shareholders. The number of votes cast for the amendmenter sufficient for approval.	t(s)
	re approved by the shareholders through voting groups. The following states ed for each voting group entitled to vote separately on the amendment(s):	nent
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and sharehol	der
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Nove Dated	ember 17, 2015	
Signature (F Signature (F	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other coppointed fiduciary by that fiduciary)	
	Jaime Ledoux	
	(Typed or printed name of person signing)	
	Vice-President	
	(Title of person signing)	

North Port High School

6400 West Price Boulevard • North Port, Florida 34291 • (941) 423-8558 • Fax: (941) 480-3199

David Jones, Principal **Meeting Minutes** November 11, 2015

Attendees

Stephanie Boyton (incoming President) Jaime Ledoux (incoming Vice President) Kim Clouden (incoming Treasurer) Lana Owens (incoming Secretary) Dena Henderson (NPHS Theatre: Dept Staff) Ryan Oliver (NPHS Theatre Dept Staff)

Agenda

Old Business

- Opened meeting with discussion on bank accounts, balances and fees.
- Discussed options of new bank account with new bank.
- Discussed food for Theatre play, Keeper of the Tales on 11/19-11/21.
- Kim C. and Firehouse to provide food for marathon rehearsal on 11/18.
 - \$5.00 meal for kids, order in advance
 - Pizza for the kids between shows on 11/20

New Business

- Update Sunbiz to reflect incoming (listed above) officers
- New Account to be opened ASAP BB&T.
- Account Holder List

 Jaime Ledoux, VP
 - Kim Clouden, Treasurer
 - At a Later date (when convenient and all receipts have been turned in from previous account at Regions)
 - Ryan Oliver & Dena Henderson

Next Meeting

Thursday Dec. 3 6:30 Location TBD