

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002729

FILED  
Jan 10, 2009  
Secretary of State

**Entity Name:** ARTISTS IN ACTION INTERNATIONAL, INC.

**Current Principal Place of Business:**

2523 ESTANCIA BLVD  
CLEARWATER, FL 33761

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1693  
CLEARWATER, FL 33757

**New Mailing Address:**

PO BOX 63  
CLEARWATER, FL 33757

**FEI Number:** 06-1815559

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

POTTER, JACK  
2523 ESTANCIA BLVD  
CLEARWATER, FL 33761 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: POTTER, JACK  
Address: 2523 ESTANCIA BLVD.  
City-St-Zip: CLEARWATER, FL 33761

Title: D ( ) Delete  
Name: SLEDGE, L D  
Address: 1516 COLONY COURT  
City-St-Zip: PALM HARBOR, FL 34683

Title: D ( ) Delete  
Name: MCFADYEN, BARBARA  
Address: 100 WAVERLY WAY, #310  
City-St-Zip: CLEARWATER, FL 33756

Title: D ( ) Delete  
Name: LEUFAN, PAT  
Address: 1117 WEBB DR.  
City-St-Zip: CLEARWATER, FL 33755

Title: D ( ) Delete  
Name: BRUCE, GEORGE F.  
Address: 1231 S. HERCULES AVE.  
City-St-Zip: CLEARWATER, FL 33764

**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: D (X) Change ( ) Addition  
Name: LUEFAN, PAT  
Address: 1117 WEBB DR.  
City-St-Zip: CLEARWATER, FL 33755

Title: D (X) Change ( ) Addition  
Name: MODICA, REBECCA  
Address: 2183 EDYTHE DRIVE  
City-St-Zip: DUNEDIN, FL 34698

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: BARBARA MCFADYEN

D

01/10/2009

Electronic Signature of Signing Officer or Director

Date