2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N08000002670

Entity Name: JPT DRAMA BOOSTERS INC

FILED Jul 25, 2009

Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10600 RIVERSIDE DRIVE CORAL SPRINGS, FL 33071 **Current Mailing Address: New Mailing Address:** 10600 RIVERSIDE DRIVE CORAL SPRINGS, FL 33071 FEI Number: 16-1766622 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOHNSON, ROSANNE 11924 NW 2ND COURT CORAL SPRINGS, FL 33071 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** (X) Change () Addition () Delete JOHNSON, ROSANNE JOHNSON, ROSANNE Name: Name: 11924 NW 2ND COURT Address: 11924 NW 2ND COURT Address: City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: CORAL SPRINGS, FL 33071 Title: TREA Title: TREA (X) Change () Addition () Delete D'ATTILO, VIRGINIA B Name: DIRITO, MARIE Name: Address: 368 NW 112TH AVE Address: 9259 NW 13TH PLACE City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: CORAL SPRINGS, FL 33071 Title: **VPRE** () Delete Title: PRE2 (X) Change () Addition FUENTES, ELIZBETH FUENTES, ELIZBETH Name: Name: Address: 659 NW 88TH DRIVE Address: 659 NW 88TH DRIVE City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: CORAL SPRINGS, FL 33071 Title: SEC () Delete Title: () Change () Addition Name: KRAFT, STEPHANIE Name: Address: 11081 NW 1ST COURT Address: City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: Title: () Delete Title: **VPRE** () Change (X) Addition Name: Name: RAHAM, MARILOU 659 NW 99TH TERR Address: Address: City-St-Zip: City-St-Zip: CORAL SPRINGS, FL 33071

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: ROSANNE JOHNSON PRE1 07/25/2009