

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003425

FILED  
Apr 05, 2010  
Secretary of State

**Entity Name:** THE NATURE COAST PERFORMERS, INC.

**Current Principal Place of Business:**

3454 NORTH BAY AVENUE  
CRYSTAL RIVER, FL 34428

**New Principal Place of Business:**

**Current Mailing Address:**

% THE NATURE COAST PERFORMERS, INC.  
P.O. BOX 2762  
CRYSTAL RIVER, FL 34423

**New Mailing Address:**

% THE NATURE COAST PERFORMERS, INC.  
P.O. BOX 2762  
CRYSTAL RIVER, FL 34423 US

**FEI Number:** 26-4530597

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITH, JANE K  
3454 NORTH BAY AVENUE  
CRYSTAL RIVER, FL 34428 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: V  
Name: COPE, JOHN  
Address: 2155 NORTH INWOOD TERRACE  
City-St-Zip: CRYSTAL RIVER, FL 34428 US

Title: P  
Name: SMITH, JANE  
Address: 3454 NORTH BAY AVENUE  
City-St-Zip: CRYSTAL RIVER, FL 34428 US

Title: S  
Name: CAPELLE, KATHLEEN  
Address: 7 GREVILLEA COURT  
City-St-Zip: HOMOSASSA, FL 34446 US

Title: T  
Name: CAPELLE, THOMAS  
Address: 7 GREVILLEA COURT  
City-St-Zip: HOMOSASSA, FL 34446 US

I hereby 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 all other like empowered.

SIGNATURE: JANE SMITH

PRES

04/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date