

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000010341

FILED
Mar 20, 2011
Secretary of State

Entity Name: BARTRAM TRAIL HIGH SCHOOL THEATRE BOOSTERS ASSOCIATION, INC.

Current Principal Place of Business:

7399 LONGLEAF PINE PARKWAY
C/O MS. AVA FIXEL, THEATRE DIRECTOR
ST JOHNS, FL 32259

New Principal Place of Business:

Current Mailing Address:

7399 LONGLEAF PINE PARKWAY
C/O MS. AVA FIXEL, THEATRE DIRECTOR
ST JOHNS, FL 32259

New Mailing Address:

1268 STONEHEDGE TRAIL LANE
C/O KATHERINE MAY, PRESIDENT
ST AUGUSTINE, FL 32092

FEI Number: 27-3896910

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIXEL, AVA B
7399 LONGLEAF PINE PARKWAY
C/O MS. AVA FIXEL, THEATRE DIRECTOR
ST JOHNS, FL 32259 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: PRES
Name: MAY, KATHERINE L
Address: 1268 STONEHEDGE TRAIL LANE
City-St-Zip: ST AUGUSTINE, FL 32092 US

Title: VP
Name: FIXEL, LEIA
Address: 540 FRUIT COVE ROAD
City-St-Zip: ST JOHNS, FL 32259 US

Title: SECR
Name: NEHRING, VIRGINIA
Address: 741 DEWBERRY DRIVE
City-St-Zip: JACKSONVILLE, FL 32259 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: KATHERINE L MAY

PRES

03/20/2011

Electronic Signature of Signing Officer or Director

Date