

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 28, 2012
Secretary of State

DOCUMENT# N19813

Entity Name: FLORIDA STATE THESPIAN SOCIETY, INC.**Current Principal Place of Business:**11311 BOYETTE ROAD
RIVERVIEW, FL 33569**New Principal Place of Business:****Current Mailing Address:**11311 BOYETTE ROAD
RIVERVIEW, FL 33569**New Mailing Address:****FEI Number:** 59-2892076**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HAWKINS, DARON
11311 BOYETTE ROAD
RIVERVIEW, FL 33569 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: PD
Name: HAWKINS, DARON
Address: 11311 BOYETTE
City-St-Zip: RIVERVIEW, FL 33569

Title: D
Name: BLANK, LANCE
Address: 12811 GLADES ROAD
City-St-Zip: BOCA RATON, FL 33498

Title: D
Name: GUST, JONATHAN
Address: 100 COCO LANE
City-St-Zip: JUPITER, FL 33458

Title: D
Name: LOETE, JASON
Address: 6740 PANTHER LANE
City-St-Zip: FT. MYERS, FL 33919

Title: D
Name: WHITTACKER, CHRISTA
Address: 808 OVERBROOK DRIVE
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: D
Name: CARR, DIANE
Address: 5582 PENWAY COURT
City-St-Zip: CINCINNATI, OH 45239

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: DARON HAWKINS

PD

09/28/2012

Electronic Signature of Signing Officer or Director

Date