2005 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N24166

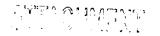


Secretary of State
05-13-2005 90219 030 ****61.25

Principal Place of Business 5939 KENDREW DRIVE PORT ORANGE, FL 32127 US 16 COBBLESTONE COURT CASSELBERRY, FL 32707-5410 US 2. Principal Place of Business 3. Mailing Address 217 13 05 FON AVENUE	E005.			
	50052005			
1 XII DOSTON TIVENUE				
Suite, Apt. #, etc. Suite, Apt. #, etc. Apì. ≠ 002	04222005 Chg-NP CR2E037 (10/03)			
City & State City & State ALTAMONTE SpainGS	4. FEI Number Applied For 59-2914026 Not Applicable			
Zip Country Zip Country 32 70 1 USA	5. Certificate of Status Desired \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent Name	7. Name and Address of New Registered Agent			
THOMAS, WARREN	Street Address (P.O. Box Number is Not Acceptable)			
Char	7:- 0-4-			
City	FL Zip Code			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature requirements) Filling Fee is \$61.25 9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS 11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE D □ Delete TITLE NAME DUBOIS, PHIL NAME STREET ADDRESS P.O. BOX 49237 STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL 33743 CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE SD □ Delete TITLE NAME FERRAR, DORIS B NAME STREET ADDRESS 115 WOODLAND DRIVE STREET ADDRESS CITY-ST-ZIP LEESBURG, FL CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE PD Delete TITLE NAME THOMAS, WARREN STREET ADDRESS CITY-ST-ZIP PORT ORANGE, FL 32127 CITY-ST-ZIP CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE TD Delete TITLE NAME HENSING, HAZEL B. STREET ADDRESS CITY-ST-ZIP CASSELBERRY, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE VP/D □ Delete TITLE NAME COLE, SUSAN NAME STREET ADDRESS 1211 OLD HIGHWAY 441 STREET ADDRESS CITY-ST-ZIP MOUNT DORA, FL 32757 CITY-ST-ZIP	☐ Change ☐ Addition			
TITLE NAME WALSH, CHRISTOPHER STREET ADDRESS CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714 Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Thereby certify that the information supplied with this filling does not qualify for the exemption stated in	Change Addition			

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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:	Hazel Ordensing	G HAZEL B. HENSING	TREASURER	5-09-05	407-830-8548	
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #		



#N24166 50052005

ORLANDO AREA THEATRE ORGAN SOCIETY, INC. 5939 Kendrew Drive
Port Orange FL 32127-5887

FEI Number 59-2914026

COMPLETE LIST OF OFFICERS AND DIRECTORS AS OF MARCH 13, 2005

President/Director Thomas, Warren 5939 Kendrew Drive Port Orange FL 32127-5887

Vice President/Director Cole-Shaw, Susan 1211 Old Highway 441 Mount Dora FL 32757

Treasurer/Director Ferrar, Doris 115 Woodland Drive Leesburg FL 34788

Treasurer/Director Hensing, Hazel B. 217 Boston Avenue -#002 Altamonte Springs FL 32701 Director Doyle, Jack 1631 Fishermans Street Merritt Island FL 32952

Director DuBois, Phil P. O. Box 49237 St. Petersburg FL 33743

Director
-Jeerings, Donald3456 Futch Road
Plant City FL 33506

Director Steele, John 5939 Kendrew Drive Port Orange FL 32127-5887

Director Walsh, Christoher 309 Spring Valley Altamonte Springs FL32714