2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24166

FILED Mar 31, 2009 Secretary of State

Entity Name: ORLANDO AREA THEATRE ORGAN SOCIETY, INC.

Current Principal Place of Business: New Principal Place of Business:

873 LITTLE BEND RD

ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address: New Mailing Address:

PO BOX 161548

ALTAMONTE SPRINGS, FL 327161548 US

FEI Number: 59-2914026 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:

NARDY, JOHN A JR

873 LITTLE BEND RD

NARDY, JOHN A PD

873 LITTLE BEND RD

ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL 32714 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: JOHN A. NARDY, JR. 03/31/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 VD
 () Delete
 Title:
 VPD
 (X) Change () Addition

 Name:
 COLESHAW, SUSAN
 Name:
 COLESHAW, SUSAN

 Address:
 1211 OLD HWY 441
 Address:
 1211 OLD HWY 441

 City-St-Zip:
 MOUNT DORA, FL 32757
 City-St-Zip:
 MOUNT DORA, FL 32757 US

Title: D () Delete Title: D (X) Change () Addition

 Name:
 DUBOIS, PHIL
 Name:
 DUBOIS, PHIL US

 Address:
 PO BOX 49237
 Address:
 PO BOX 49237

City-St-Zip: SAINT PETERSBURG, FL 33743 City-St-Zip: SAINT PETERSBURG, FL 33743

Title: () Delete Title: AVPD (X) Change () Addition WALSH, CHRISTOPHER WALSH, CHRISTOPHER US Name: Name: Address: 309 SPRING VALLEY RD Address: 309 SPRING VALLEY RD City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: Title: STD () Change (X) Addition

Name:Name:NARDY, PHYLLIS CAddress:Address:873 LITTLE BEND ROADCity-St-Zip:City-St-Zip:ALTAMONTE SPRINGS, FL 32714

 Name:
 Name:
 WATFORD, DAVID

 Address:
 Address:
 1430 JEFFREY ROAD

 City-St-Zip:
 City-St-Zip:
 TALLAHASSEE, FL 32313

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 JEERINGS, DON

 Address:
 Address:
 3456 FUTCH ROAD

 City-St-Zip:
 City-St-Zip:
 PLANT CITY, FL 33566

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: JOHN A. NARDY, JR. PD 03/31/2009