

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24997

FILED  
Jul 06, 2006  
Secretary of State

**Entity Name:** YOUNG PEOPLE IN DRAMATIC ARTS FOUNDATION, INC.

**Current Principal Place of Business:**

2200 PERIWINKLE WAY  
SANIBEL, FL 33957

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1101  
SANIBEL, FL 33957

**New Mailing Address:**

**FEI Number:** 65-0050599      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

FLEMING, VIRGINIA L  
1036 WHISPERWOOD WAY  
SANIBEL, FL 33957 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KETTEMAN, CHUCK  
Address: 2619 WULFERT RD  
City-St-Zip: SANIBEL, FL 33957

Title: TD ( ) Delete  
Name: O'NEAL, TIMOTHY  
Address: 767 SAND DOLLAR DR  
City-St-Zip: SANIBEL, FL 33957

Title: D ( ) Delete  
Name: FLEMING, VIRGINIA  
Address: 1036 WHISPERWOOD WAY  
City-St-Zip: SANIBEL, FL 33957

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: CASSELL, ART  
Address: 2385 WULFERT ROAD  
City-St-Zip: SANIBEL, FL 33957

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ART CASSELL

PRES

07/06/2006

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

\_\_\_\_\_  
Date