2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39131

FILED Jan 05, 2011 Secretary of State

Entity Name: ST. AUGUSTINE EASTER WEEK FESTIVAL, INC.

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

1715 OLD MOULTRIE RD 478 STATE RD 16 #132 ST. AUGUSTINE, FL 32084 ST. AUGUSTINE, FL 32084

Current Mailing Address: New Mailing Address:

1715 OLD MOULTRIE RD P O BOX3631

ST. AUGUSTINE, FL 32084 ST. AUGUSTINE, FL 32085

FEI Number: 59-2910400 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GENOVAR, PHILIP B GENOVAR, PHILLIP B 1715 OLD MOULTRIE RD 4533 AVENUE A

ST. AUGUSTINE, FL 32084 US ST. AUGUSTINE, FL 32095 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: DEBORA D WEBB 01/05/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: GENOVAR, PHILLIP Address: 4533 AVENUE A

City-St-Zip: SAINT AUGUSTINE, FL 32095

Title: VD

 Name:
 BAKER, CATHERINE T

 Address:
 6913 CYPRESS POINT DR

 City-St-Zip:
 SAINT AUGUSTINE, FL 32086

Title: VD

Name: LETTERMAN, THERESA Address: 7 1/2 FAIRBANKS

City-St-Zip: SAINTAUGUSTINE, FL 32084

Title: SD

Name: LISA, COLEE

Address: 2998 NORTH 2ND STREET
City-St-Zip: SAINTAUGUSTINE, FL 32084

Title: TD

Name: WEBB, DEBORA D Address: 478 STATE RD 16

City-St-Zip: SAINT AUGUSTINE, FL 32084

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: DEBORA D WEBB TD 01/05/2011