2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44455

FILED Apr 19, 2005 Secretary of State

Entity Name: THE FLAGLER AUDITORIUM GOVERNING BOARD, INC.

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

THE FLAGLER COUNTY SCHOOL BOARD STATE ROAD 100 BUNNELL, FL 32110

Current Mailing Address: New Mailing Address:

FLAGLER CO. SCHOOL BOARD P.O. BOX 755 BUNNELL, FL 32110

FEI Number: 59-3079371 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:

CHIUMENTO, MICHAEL D 4 OLD KINGS ROAD NORTH PALM COAST, FL 32137

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

HELM. CHARLES LEVY, ARNOLD R Name: Name: P O BOX 305 7 COTTON COURT Address: Address: City-St-Zip: FLAGLER BEACH, FL 32136 City-St-Zip: PALM COAST, FL 32137

Title: PED () Delete Title: (X) Change () Addition LEVY, ARNOLD R Name: MARCUSSEN, JACK F Name:

Address: 7 COTTON COURT Address: 68 LYNBROOK DR City-St-Zip: PALM COAST, FL 32137 City-St-Zip: PALM COAST, FL 32137

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

MARACUSSEN, JACK F SCHWALB, JOEL Name: Name: 27 LAKE SUCCESS DR Address: 68 LYNBROOK DR Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: PALM COAST, FL 32137

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

Name: MADDEN, SANDRA Name: MADDEN, SANDRA Address: 45 PHEASANT DR Address: P. O. BOX 353816 City-St-Zip: PALM COAST, FL 32164 City-St-Zip: PALM COAST, FL 32135

Title: () Delete Title: () Change () Addition

ALLEMAN, BEVERLY Name: Name: 13 ANASTASIA COURT Address: Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TOM TANT DIR 04/19/2005

Electronic Signature of Signing Officer or Director

Date