2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44455

FILED Apr 15, 2008 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 3039 HIGHWAY 100 EAST PALM COAST, FL 32164

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

CHIUMENTO, MICHAEL D GAVIN, KRISTY 315 S. MAIN STREET 4 OLD KINGS ROAD NORTH PALM COAST, FL 32137 STE 300

JACKSONVILLE, FL 32207 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: KRISTY GAVIN 04/15/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition MARCUSSEN, JACK F WHETSELL, ALLEN Name: Name:

68 LYNBROOK DR 919 B NORTH HWY A1A Address: Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: FLAGLER BEACH, FL 32136

Title: PED () Delete Title: (X) Change () Addition ALLEMAN, BEVERLY Name: HAMILTON, RICHARD Name:

Address: 13 ANASTASIA COURT Address: 98 ISLAND ESTATES PARKWAY City-St-Zip: PALM COAST, FL 32137 City-St-Zip: PALM COAST, FL 32137

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

SCHWALB, JOEL HELM, CHARLES Name: Name: 27 LAKE SUCCESS DR Address: Address: P.O. BOX 328

City-St-Zip: PALM COAST, FL 32137 City-St-Zip: FLAGLER BEACH, FL 32136

Title: SD () Delete Title: SD (X) Change () Addition Name: HELM, CHARLES Name: ELLIOTT, CAROL

P. O. BOX 305 160 N PALMETTO AVE Address: Address: City-St-Zip: FLAGLER BEACH, FL 32136 City-St-Zip: FLAGLER BEACH, FL 32136

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 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: ALLEN WHETSELL PD 04/15/2008