

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001807

FILED
Jan 23, 2010
Secretary of State

Entity Name: ORMOND BEACH PERFORMING ARTS CENTER FRIENDS, INC.

Current Principal Place of Business:

675 RIVERSIDE DR
ORMOND BEACH, FL 32176

New Principal Place of Business:

Current Mailing Address:

675 RIVERSIDE DR
ORMOND BEACH, FL 32176

New Mailing Address:

FEI Number: 59-3180100

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HORAN, RUTH
675 RIVERSIDE DR
ORMOND BEACH, FL 32176 US

Name and Address of New Registered Agent:

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
Name: HORAN, RUTH
Address: 675 RIVERSIDE DR
City-St-Zip: ORMOND BEACH, FL

Title: VD
Name: MILLER, LOIS ANN
Address: 436 S NOVA ROAD LOT # 81
City-St-Zip: ORMOND BEACH, FL 32174

Title: SD
Name: STRONG, DOROTHY
Address: 709 OCEAN SHORE BLVD
City-St-Zip: ORMOND BEACH, FL

Title: TD
Name: ELLIOTT, CAROL
Address: 18 LAKE VISTA WAY
City-St-Zip: ORMOND BEACH, FL 32174

Title: D
Name: OSSINSKY, LOUIS JR.
Address: 924 PENINSULA DR
City-St-Zip: ORMOND BEACH, FL

Title: D
Name: BURTON, ALAN H
Address: 915 OCEAN SHORE BLVD #707
City-St-Zip: ORMOND BCH, FL 32176

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: RUTH HORAN

PD

01/23/2010

Electronic Signature of Signing Officer or Director

Date