2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000843

FILED Apr 09, 2009 Secretary of State

Entity Name: THE CULTURAL CENTER AT PONTE VEDRA BEACH, INC.

Current Principal Place of Business: New Principal Place of Business: 50 EXECUTIVE WAY PONTE VEDRA BEACH, FL 32082 LIS **Current Mailing Address: New Mailing Address:** 50 EXECUTIVE WAY PONTE VEDRA BEACH, FL 32082 US FEI Number: 59-3238148 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: RAX CO 50 NORTH LAURA ST **SUITE 3400** JACKSONVILLE, FL 32201 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition JEWETT, WALTER Name: Name: 9341 PRESTON TRAIL EAST Address: Address: City-St-Zip: PONTE VERA BCH., FL 32082 City-St-Zip: Title: DIR () Delete Title: VΡ (X) Change () Addition ORR, KATHY Name: ORR, KATHY Name: Address: 133 RETREAT PLACE Address: 133 RETREAT PLACE City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: PONTE VEDRA BEACH, FL 32082 Title: SEC Title: SEC (X) Change () Addition () Delete BUZBY, ANNE AUTREY, HILAH Name: Name: Address: 512 PONTE VEDRA BLVD Address: 9331 PRESTON TRAIL EAST City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: PONTE VEDRA BEACH, FL 32082 Title: () Delete Title: (X) Change () Addition COX, DENNIS Name: REYNOLDS, PETER Name: 238 PONTE VEDRA PARK DR. 240 PONTE VEDRA PARK DR. Address: Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: PONTE VEDRA BEACH, FL 32082 Title: () Delete Title: () Change () Addition WILLIAMS, RICHARD Name: Name: 193 PLANTATION CIRCLE SO. Address: Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 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: RICHARD WILLIAMS E.D. 04/09/2009