2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2009
Secretary of State

DOCUMENT# N94000002791

Entity Name: FLORIDA GRAND OPERA, INC.

Current Principal Place of Business:

8390 NW 25TH ST.
MIAMI, FL 331221504

New Principal Place of Business:

Current Mailing Address:

8390 NW 25TH ST.
MIAMI, FL 331221504

New Mailing Address:

FEI Number: 65-0496477 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HEUER, ROBERT M
8390 NW 25TH STREET
MIAMI, FL 331221504 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:	M	( ) Delete
Name:	HEUER, ROBERT M CEO	
Address:	8390 NW 25TH STREET	
City-St-Zip:	MIAMI, FL 331221504	
Title:	TD	( ) Delete
Name:	MENDELSON, VICTOR H	
Address:	8390 NW 25TH STREET	
City-St-Zip:	MIAMI, FL 331221504	
Title:	PD	( ) Delete
Name:	ROBINSON, JANE A	
Address:	1200 CORAL WAY	
City-St-Zip:	MIAMI, FL 33145	
Title:	CD	( ) Delete
Name:	HARRISON, BEN F	
Address:	8390 NW 25TH STREET	
City-St-Zip:	MIAMI, FL 331221504	
Title:	SD	( ) Delete
Name:	GORDON, EVA U	
Address:	8390 NW 25TH STREET	
City-St-Zip:	MIAMI, FL 331221504	
Title:	PD	(X) Delete
Name:	ROBINSON, JANE A	
Address:	8390 NW 25TH STREET	
City-St-Zip:	MIAMI, FL 331221504	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	PD	(X) Change ( ) Addition
Name:	ROBINSON, JANE A	
Address:	8390 NW 25TH STREET	
City-St-Zip:	MIAMI, FL 331221504	
Title:	CD	(X) Change ( ) Addition
Name:	HINKLEY, ROGER R	
Address:	8390 NW 25TH STREET	
City-St-Zip:	MIAMI, FL 331221504	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
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: ROBERT M HEUER MR 04/02/2009

Electronic Signature of Signing Officer or Director — Date