

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005846

FILED
Mar 23, 2009
Secretary of State

Entity Name: INTERNATIONAL ALLIANCE OF THEATRICAL STAGE EMPLOYEES LOCAL 631, REALTY COMPANY

Current Principal Place of Business:

5385 CONROY ROAD
SUITE 200
ORLANDO, FL 32811 US

New Principal Place of Business:

Current Mailing Address:

5385 CONROY ROAD
SUITE 200
ORLANDO, FL 32811 US

New Mailing Address:

FEI Number: 59-1713917

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAST JR., JOSEPH M PRES.
5385 CONROY ROAD
SUITE 200
ORLANDO, FL 32811 US

Name and Address of New Registered Agent:

BARNES, WILLIAM H PRES.
5385 CONROY ROAD
SUITE 200
ORLANDO, FL 32811 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: WILLIAM H. BARNES

03/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MAST JR., JOSEPH M
Address: 5385 CONROY RD, STE 200
City-St-Zip: ORLANDO, FL 32811 US

Title: D () Delete
Name: BOWLES, KIMBERLY A SEC-TRE
Address: 5385 CONROY ROAD, STE 200
City-St-Zip: ORLANDO, FL 32811 US

Title: D () Delete
Name: ALLEN JR., WILLIAM C REP
Address: 5385 CONROYROAD, STE 200
City-St-Zip: ORLANDO, FL 32811 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BARNES, WILLIAM H
Address: 5385 CONROY RD, STE 200
City-St-Zip: ORLANDO, FL 32811 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LANINFA, MICHAEL C REP
Address: 5385 CONROYROAD, STE 200
City-St-Zip: ORLANDO, FL 32811 US

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: KIMBERLY A. BOWLES

D

03/23/2009

Electronic Signature of Signing Officer or Director

Date