2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004823

FILED Apr 13, 2009 Secretary of State

Entity Name: MOUNT DORA FESTIVAL OF MUSIC AND LITERATURE, INC.

Current Principal Place of Business: New Principal Place of Business: 1027 MCDONALD ST MOUNT DORA, FL 32757 **Current Mailing Address: New Mailing Address:** P.O. BOX 712 MOUNT DORA, FL 327560712 FEI Number: 59-3467731 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: HOWELL, NANCY 1027 MCDOANLD ST MOUNT DORA, FL 32757 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: DS () Delete (X) Change () Addition ETTER, ROBIN JANET, PUIG Name: Name: 520 W TENTH AVE Address: P.O. BOX 90 Address: City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: TAVARES, FL 32778 Title: () Delete Title: D (X) Change () Addition HAIMES, STEPHANIE Name: TERRI, STEWART Name: Address: 1995 N. DONNELLY Address: 201 W. 11TH AVE. City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: MOUNT DORA, FL 32757 Title: DS () Delete Title: (X) Change () Addition MINK, CHRISTINE MARY, ABRAHAM Name: Name: 1741 PARK FOREST DR 1808 LAKE EUSTIS DRIVE Address: Address: City-St-Zip: MOUNT DORA, FL 32757 City-St-Zip: EUSTIS, FL 32726 Title: DT () Delete Title: DT (X) Change () Addition Name: KESSINGER, CAROL Name: KESSINGER, NORMAN 20621 SHADY OAK LN Address: Address: 20621 SHADY OAK LN City-St-Zip: EUSTIS, FL 32736 City-St-Zip: EUSTIS, FL 32736 Title: (X) Delete Title: () Change () Addition GARAY, DEBBIE Name: Name: 25243 PUNKIN CTR RD Address: Address: City-St-Zip: HOWEY IN THE HILLS, FL 34737 City-St-Zip: Title: (X) Delete Title: () Change () Addition TOTH STEVEN Name: Name: Address: 19407 SPRING OAK DR Address: EUSTIS, FL 32736 City-St-Zip: 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: NORMAN E KESSINGER DT 04/13/2009