2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2008
Secretary of State

DOCUMENT# N98000001738

Entity Name: ISLAND COMMUNITY THEATRE, INCORPORATED

Current Principal Place of Business:

PO BOX 5108
GULFPORT, FL 33737

New Principal Place of Business:

1405 58TH STREET SOUTH
GULFPORT, FL 33707

Current Mailing Address:

PO BOX 5108
GULFPORT, FL 33737

New Mailing Address:

FEI Number: 59-3501809 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIMONE, STEPHEN P.A.
6439 CENTRAL AVE
SAINT PETERSBURG, FL 337108411 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 ( ) Delete
Name: JENSEN, JEFF
Address: 1405 58TH ST SOUTH
City-St-Zip: GULFPORT, FL 33707

Title: T ( ) Delete
Name: KASTEL, RICK
Address: 2581 BRAMBLEWOOD DR E
City-St-Zip: CLEARWATER, FL 33763 US

Title: SD ( ) Delete
Name: LANDIS, JUDY
Address: 14039 LEEWARD DRIVE
City-St-Zip: SEMINOLE, FL 33776

Title: V ( ) Delete
Name: BETTS-RICE, LINDA
Address: 1246 LAGOON LN
City-St-Zip: TRASURE ISLAND, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: RICK KASTEL T 01/24/2008

Electronic Signature of Signing Officer or Director — Date