2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002532

FILED Mar 04, 2007 Secretary of State

Entity Name: HALL/HILL PERFORMING ARTS, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	HMAN 21 STREET KE PINES, FL 33028				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	HMAN 21 STREET E PINES, FL 33028				
FEI Number:	: 65-0832185 FEI Nur	nber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Current F	Registered Agent:	Name and Address	of New Registered Agent:	
12821 NW	, JEFFREY 21 STREET (E PINES, FL 33028	US			
	named entity submits t e of Florida.	his statement for the ρι	urpose of changing its register	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electronic Signat	ture of Registered Ager	nt	Date	
OFFICERS	S AND DIRECTORS:		ADDITIONS/CHANG	SES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () Delete OLSEN, DAVID C 15425 NW 2 CT. MIAMI, FL 33169		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	C () Delete HILL, ALLEN 215 WEST 29TH STREET NEW YORK, NY 10001	· #6	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () Delete MAIER, DIANE 14278 DINSMOOR DRIVE CHESTERFIELD, MO 630		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delete RICHMAN, JEFF 12821 NW 21 STREET PEMBROKE PINES, FL 3	3028	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete HALLIDAY, SUSAN 7080 NOVA DRIVE #304 E DAVIE, FL 33317	3	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete WITES, ARLENE 2634 NW 99TH AVE CORAL SPRINGS, FL 33	065	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: JEFF RICHMAN T 03/04/2007