

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003214

FILED
Apr 24, 2005
Secretary of State

Entity Name: COMMUNITY PERFORMING ARTS CENTER, INC.

Current Principal Place of Business:

4433 BOUGAINVILLE DRIVE
LAUDERDALE-BY-THE-SEA, FL 33308

New Principal Place of Business:

Current Mailing Address:

4433 BOUGAINVILLE DRIVE
LAUDERDALE-BY-THE-SEA, FL 33308

New Mailing Address:

4430 SEA GRAPE DRIVE
LAUDERDALE-BY-THE-SEA, FL 33308

FEI Number: 65-1050598

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALEY, JAMES D P.A.
2122 HOLLYWOOD BLVD.
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

SMITH, J A
132 S CYPRESS ROAD
526
POMPANO BEACH, FL 33060 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: J AUBER SMITH

04/24/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TR () Delete
Name: RAGUSA, CONSTANCE I
Address: 4430 SEAGRAPE
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: LANE, BARBARA
Address: 2707 NE 14TH ST #405
City-St-Zip: POMPANO BEACH, FL 33062

Title: D () Delete
Name: RAGUSA, VINCENT
Address: 4430 SEA GRAPE DR.
City-St-Zip: LAUDERDALE-BY-THE-SEA, FL 33308

Title: D () Delete
Name: SMITH, J. AUBER
Address: 440 S.E. 4TH CT.
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: GEESEY, CINDY
Address: 256 IMPERIAL LANE
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: WHITE, MARIE
Address: 234 HIBISCUS AVE #374
City-St-Zip: FORT LAUDERDALE, FL 33308

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: PRES (X) Change () Addition
Name: SMITH, J. AUBER
Address: 440 S.E. 4TH CT.
City-St-Zip: POMPANO BEACH, FL 33060

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 for the exemption stated in Section 119.07(3)(i), 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: J AUBER SMITH

PRES

04/24/2005

Electronic Signature of Signing Officer or Director

Date