

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000119889

FILED
Mar 29, 2009
Secretary of State

Entity Name: PAI LUM FAMILY ARTS SOCIETY, INC.

Current Principal Place of Business:

1045 W. INTERNATIONAL SPEEDWAY BLVD.
DAYTONA BEACH, FL 32114

New Principal Place of Business:

1860 MASON AVENUE
(ARC)
DAYTONA BEACH, FL 32118

Current Mailing Address:

P. O. BOX 9351
DAYTONA BEACH, FL 32120

New Mailing Address:

1860 MASON AVENUE
(ARC)
DAYTONA BEACH, FL 32118

FEI Number: 45-0543160

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUDSON, RUSSELL H ST
1045 WEST INTERNATIONAL SPEEDWAY BLVD
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

MATTHEWS, STEVEN
1860 MASON AVENUE
DAYTONA, FL 32118 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: STEVEN MATTHEWS

03/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPV () Delete
Name: DICK, LYNDON S PV
Address: 1870 MASON AVE.
City-St-Zip: DAYTONA BEACH, FL 32117

Title: DST () Delete
Name: HUDSON, RUSSELL H ST
Address: 1045 W. INTERNATIONAL SPEEDWAY BLVD.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: ST. CHARLES, THOMAS D
Address: 1860 MASON AVENUE
City-St-Zip: DAYTONA BEACH, FL 32118

Title: VP (X) Change () Addition
Name: MATTHEWS, STEVE
Address: 1860 MASON AVENUE
City-St-Zip: DAYTONA BEACH, FL 32118

Title: T () Change (X) Addition
Name: STEIN-COHEN, LISA
Address: 1860 MASON AVENUE
City-St-Zip: DAYTONA BEACH, FL 32118

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS D. ST. CHARLES

C

03/29/2009

Electronic Signature of Signing Officer or Director

Date