

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000000756

Entity Name: FREED PERFORMING ARTS INC.**Current Principal Place of Business:**2 SOUTHERN TRACE BLVD
ORMOND BEACH, FL 32174**Current Mailing Address:**PO BOX 731242
ORMOND BEACH, FL 32173**FEI Number:** 81-1235158**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CINDY, LESCARBEAU
2 SOUTHERN TRACE BLVD.
ORMOND BEACH, FL 32174 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:** CINDY LESCARBEAU

04/26/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	LESCARBEAU, CINDY
Address	PO BOX 731242
City-State-Zip:	ORMOND BEACH FL 32173

Title	SEC
Name	DOLICH, MELANIE
Address	19 RIVER RIDGE TRAIL
City-State-Zip:	ORMOND BEACH FL 32174

Title	DIR
Name	FREEMAN, KIM
Address	3494 BAREBACK TRAIL
City-State-Zip:	ORMOND BEACH FL 32174

Title	VP
Name	MCCALL, NATALIE
Address	1311 REDBOURNE LANE
City-State-Zip:	ORMOND BEACH FL 32174

Title	TREA
Name	BRAY, BRENDA
Address	1450 HAND AVENUE
City-State-Zip:	ORMOND BEACH FL 32174

Title	DIR
Name	BLAIR-BRITT, LORAY
Address	127 SHADY BRANCH TRAIL
City-State-Zip:	ORMOND BEACH FL 32174

I hereby 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 all other like empowered.

SIGNATURE: BRENDA BRAY**TREASURER**

04/26/2019

Electronic Signature of Signing Officer/Director Detail

Date