

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711125

FILED  
Feb 16, 2011  
Secretary of State

**Entity Name:** CULTURAL PARK THEATRE COMPANY, INC.

**Current Principal Place of Business:**

CULTURAL PARK THEATRE  
528 CULTURAL PARK BLVD  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 150022  
COPE CORAL, FL 33910

**New Mailing Address:**

FEI Number: 59-1155302

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MORAN, MICHAEL D  
12645 S. STREET  
FORT MYERS, FL 33905 US

**Name and Address of New Registered Agent:**

MORAN, MICHAEL D  
528 CULTURAL PARK BLVD  
CAPE CORAL, FL 33990 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: MICHAEL D. MORAN

02/16/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MAGLIONE-CHENAULT, LISA  
Address: 3532 SW 17TH PL  
City-St-Zip: CAPE CORAL, FL 33914

Title: 1VP  
Name: LONG, LAURIE  
Address: 424 SE 32ND ST.  
City-St-Zip: CAPE CORAL, FL 33904

Title: 2VP  
Name: WENGERTER, CHRISTI  
Address: 118 SE 8TH PLACE  
City-St-Zip: CAPE CORAL, FL 33990

Title: 3VP  
Name: SPENCER, MELINA  
Address: 2015 SW 8TH CT.  
City-St-Zip: CAPE CORAL, FL 33991

Title: RC  
Name: FRASCA, BOBBI  
Address: 1405 HANCOCK BRIDGE PKWY  
City-St-Zip: CAPE CORAL, FL 33990

Title: T  
Name: KOC, JUNE  
Address: 1990 ROSEATE LANE  
City-St-Zip: SANIBEL, FL 33957

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: LISA MAGLIONE-CHENAULT

P

02/16/2011

Electronic Signature of Signing Officer or Director

Date