

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717796

FILED  
Apr 09, 2010  
Secretary of State

**Entity Name:** THEATRE JACKSONVILLE, INC.

**Current Principal Place of Business:**

2032 SAN MARCO BLVD  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

2032 SAN MARCO BLVD  
JACKSONVILLE, FL 32207

**New Mailing Address:**

FEI Number: 59-0718493

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KILLEA, MICHAEL  
2537 HOLLY POINT E  
ORANGE PARK, FL 32073 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: KILLEA, MICHAEL  
Address: 2537 HOLLY PT E  
City-St-Zip: ORANGE PARK, FL 32073

Title: SD  
Name: JOHNSTON, PAIGE  
Address: 4333 LANDOVER DRIVE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: TD  
Name: MAJDANICS, KRISTEN  
Address: 1478 RIVERPLACE BLVD., #1804  
City-St-Zip: JACKSONVILLE, FL 32207

Title: M  
Name: BOONE, SARAH  
Address: 1815 VAN WERT AVE #4  
City-St-Zip: JACKSONVILLE, FL 32205

Title: D  
Name: BOB, LEDOUX  
Address: 236 SEA ISLAND DRIVE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VD  
Name: PRICE, PAUL  
Address: 6600 CORPORATE CENTER PARKWAY  
City-St-Zip: JACKSONVILLE, FL 32216

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: SARAH BOONE

M

04/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date