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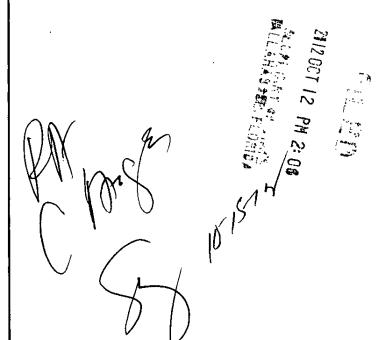
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(Address)	-				
(Address)	-				
(City/State/Zip/Phone #)	-				
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(Document Number)					
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COVER LETTER

TO: Amendment Section

Division of Corporations

_{subject:} The Barn Theatre, Inc.

Name of Corporation

DOCUMENT NUMBER: 719982

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert L. Jennings

Name of Contact Person

Jennings & Valancy, P.A.

Firm/Company

306 S.E. Detroit Avenue

Address

Stuart, Florida 34994

City/State and Zip Code

HBrj@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert L. Jennings

,772 🔍 286-2798

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	ige is submitted for	a corporation orga	02, 607.1508, or 617.1508, Florida nized under the laws of the State of	Florida	-
1. The name of the	т.	erea ognice or regist ne Barn Theat	tered agent, or both, in the State of tre, Inc.	rioriaa.	
2. The principal		400 E. Ocean	Blvd., Stuart, Florida 34	995	
3. The mailing ac	ddress (if different):				
4. Date of incorp	oration/qualification	114/71	Document number: 7199	182	
	street address of the tment of State: (If re		agent and registered office on file led)	with the	
	Anthony R. (Colombo (res	igned)		
	8186 Blackb	ead Court			
	Port St. Luci	e, FL 34952		170	
6. The name and (if changed):	street address of the	e new registered ag	ent (if changed) and /or registered		i
	Robert L. Jei	nnings		- 5 3 N	1 - mercer.
	306 S.E. Det		·		
	Stuart, Florida		OT acceptable		
as changed will	ss of its registered of	office and the stree	t address of the business office of		ent,
Such change wa authorized by th	s authorized by reseate board, or the corp	olution duly adopte poration has been n	ed by its board of directors or by a otified in writing of the change.	nn officer so	
John 1	re of an officer or diffector	\	J. Pat Montgomery, Pr	resident	<u></u>
I hereby accept I further agree to	the appointment as to comply with the p	provisions of all sta familiar with and	nd agree to act in this capacity. Itutes relative to the proper and c accept the obligation of my positi flect a change in the registered of in writing of this change.	omplete ion as registered fice address, I	
Page	2 () 7	\bigcirc	10/8/12		
_	nature of Registered Agent		Date		=
If signing on be	half of an entity:	•			
Ť	yped or Printed Name				

* * * FILING FEE: \$35.00 * * *