FILED

\2001 UNIFORM BUSINESS REPORT (UBR)

Feb 27, 2001 8:00 am Secretary of State **DOCUMENT # 740338** 1. Entity Name THE AMERICAN STAGE COMPANY, INC. 02-27-2001 90312 008 ****61.25 Mailing Address Principal Place of Business 211 3RD ST SOUTH 211 3RD ST SOUTH 923493 PO BOX 1560 PO BOX 1560 ST PETERSBURG FL 33731 ST PETERSBURG FL 33731 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-1777189 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) LOWRY, LEE MANWARING 211 3RD ST S ST PETERSBURG FL 33701 City Zip Code 8. 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to 9. Election Campaign Financing FILE NOW: **\$5.00** May Be П Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Addition. Change TITI F ☐ Delete TITLE Ballard, Marion MITCHELL, KENNETH NAME NAME 1255 Brightwaters Blvd. NE St. Petersburg, FL 33704 STREET ADDRESS STREET ADDRESS 211 3RD ST S CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 33701 ☐ Addition ☐ Change Delete TITLE TITLE NAME LOWRY, LEE M NAME STREET ADDRESS STREET ADDRESS 211 3RD ST SO CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL 33701 ☐ Addition Change Delete TITLE TITLE NAME HOUGH, SUSAN NAME STREET ADDRESS STREET ADDRESS 400 COFFEE POT RIVIERA NE CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL 33704 Change ☐ Addition Delete TITLE TITI F NAME NAME **EVERETT, USA** STREET ADDRESS STREET ADDRESS **600 21ST AVE NE** CITY-ST-ZIP CITY-ST-ZIP ST PETERSBURG FL 33704 ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if ree Manwaring Loute

SIGNATURE