

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# F07000001735

FILED  
Jun 15, 2005  
Secretary of State

Entity Name: THE ACTORS' FUND OF AMERICA INCORPORATED

**Current Principal Place of Business:**

729 7TH AVE 10TH FL  
NEW YORK, NY 10019

**New Principal Place of Business:**

**Current Mailing Address:**

729 7TH AVE 10TH FL  
NEW YORK, NY 10019

**New Mailing Address:**

FEI Number: 13-1635251      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

PAVLEY, LARRY  
859 SNELL ISLE BLVD  
ST PETERSBURG, FL 33704      US

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

PAULEY, LARRY  
859 SNELL ISLE BLVD  
ST PETERSBURG, FL 33704      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: LARRY PAULEY

06/15/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P ( ) Delete  
Name: DILLON, TOM  
Address: 7818 10TH AVE  
City-St-Zip: BROOKLYN, NY 11228

Title: 1-VP ( ) Delete  
Name: O'CONNOR, NANCY  
Address: 30822 BROAD BEACH ROAD  
City-St-Zip: MALIBU, CA 90265

Title: VPS ( ) Delete  
Name: HOLLERITH, CHARLES JR  
Address: 435 E 57TH ST #14A  
City-St-Zip: NEW YORK, NY 10022

Title: VPT ( ) Delete  
Name: SMITH, PHILIP J  
Address: 710 PARK AVE #11A  
City-St-Zip: NEW YORK, NY 10021

**ADDITIONS/CHANGES:**

Title: P (X) Change ( ) Addition  
Name: MITCHELL, BRIAN S  
Address: 243 WEST 98TH STREET #5C  
City-St-Zip: NEW YORK, NY 10025

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: HOLLERITH, CHARLES JR  
Address: 435 E 57TH ST #14A  
City-St-Zip: NEW YORK, NY 10022

Title: T (X) Change ( ) Addition  
Name: DUNCAN, JOHN A  
Address: 60 LONG POINT DRIVE  
City-St-Zip: AMELIA ISLAND, FL 32034

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BRIAN S. MITCHELL

P

06/15/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date