

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 16, 2003 8:00 am
Secretary of State

0011251

05-16-2003 90182 046 ****61.25

DOCUMENT # **N00000005572**

1. Entity Name
PLAYWRIGHTS' ROUND TABLE, INC.



Principal Place of Business
**1054 MONTGOMERY ROAD
ALTAMONTE SPRINGS FL 32714**

Mailing Address
**1054 MONTGOMERY ROAD
ALTAMONTE SPRINGS FL 32714**

2. Principal Place of Business
1052 Montgomery Rd

3. Mailing Address
1052 Montgomery Rd



CHECK HERE IF MAKING CHANGES

City & State
Altamonte Springs, FL
Zip
32714
Country
USA

City & State
Altamonte Springs, FL
Zip
32714
Country
USA

4. FEI Number **59-3733179**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GORING, JOHN M
1054 MONTGOMERY ROAD
ALTAMONTE SPRINGS FL 32714**

7. Name and Address of New Registered Agent

Name
GORING, JOHN M
Street Address (P.O. Box Number is Not Acceptable)
1052 MONTGOMERY ROAD
City
ALTAMONTE SPRINGS FL Zip Code
32714

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *John Goring*
Signature, typed or printed name of registered agent and title if applicable.

May 14, 2003
DATE

(NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCELROY, DAVID A 2545 MADELINE AVE WINTER PARK FL 32789	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCGINNIS, MARILYN A 2545 MADELINE AVE WINTER PARK FL 32789	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MANNETTE, MARK 3960 BISCAYNE DR WINTER PARK FL 32708	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANNETTE, ALICE 3960 BISCAYNE DR WINTER PARK FL 32708	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GORING, JOHN 1054 MONTGOMERY ROAD ALTAMONTE SPRINGS FL 32714	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MDGRATH, JACK 1051 LONG BRANCH LANE OVIEDO FL 32765	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOHN GORING 2450 PLEASANT DR. LONGWOOD, FL 32714	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MARK MANNETTE 3960 BISCAYNE DR WINTER PARK, FL 32708	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AMY BRACKEL, S 4737 EMERALD FOREST WAY #1807 ORLANDO, FL 32811	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LYNDOL MICHAEL, D 14507 GREYDALE CIRCLE ORLANDO, FL 32826	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JOEL BICKNELL, VP 3874 CALIBRE BEND LN #904 WINTER PARK, FL 32792	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCGRATH, JACK 1051 LONG BRANCH LN OVIEDO, FL 32765	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *John Goring* **REQUIRE JOHN GORING, May 14, 2003**

407-788-6331

CR2E037 (10/02)