## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000004499

Entity Name: SQUARE THEATRE, INC.

FILED Mar 08, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

11878 NE 14TH AVENUE ANTHONY, FL 32617

**Current Mailing Address: New Mailing Address:** 

POST OFFICE BOX 2703 OCALA, FL 34478

FEI Number: 41-2099380 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

STALVEY, MARC 11878 NE 14TH AVENUE ANTHONY, FL 32617

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

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete STALVEY, MARC C Name: 11878 NE 14TH AVENUE Address: City-St-Zip: ANTHONY, FL 32617

Title: ( ) Delete STALVEY, VALERIE L Name: Address: 11878 NE 14TH AVENUE City-St-Zip: ANTHONY, FL 32617

**OFFICERS AND DIRECTORS:** 

Title: ( ) Delete MCLAUGHLIN, STEVEN P Name: 2794 SW 176TH AVENUE Address: City-St-Zip: DUNNELLON, FL 34432

( ) Delete Title: D, T KENDZIORA, LORELEI V Name: Address: 11760 NE 14TH AVENUE City-St-Zip: ANTHONY, FL 32617

Title: ( ) Delete HILTY, JAMES Name: 2607 SE 28TH STREET Address: City-St-Zip: OCALA, FL 34471

Title: () Delete QUIDLEY ANGIE Name: Address: 4130 SE 3RD STREET OCALA, FL 34471 City-St-Zip:

(X) Change ( ) Addition CAVALLARO, VALERIE M Name: Address: 114 W LAMPLIGHTER ST CITRUS SPRINGS, FL 34434 City-St-Zip:

Title: (X) Change ( ) Addition Name: STALVEY, VALERIE L

Address: 11878 NE 14TH AVENUE City-St-Zip: ANTHONY, FL 32617

Title: D, V (X) Change ( ) Addition

RILEY, GINNY Name: Address: 2134 NE 9 ST City-St-Zip: OCALA, FL 34470

Title: D, P (X) Change ( ) Addition

Name: HILTY, JAMES 2607 SE 28TH STREET Address: City-St-Zip: OCALA, FL 34471

Title: (X) Change ( ) Addition

ZANETTI, GENE Name:

2050 E SILVER SPRINGS BLVD Address:

City-St-Zip: OCALA, FL 34470

Title: (X) Change ( ) Addition

QUIDLEY, ANGIE Name: Address: 4130 SE 3RD STREET OCALA, FL 34471 City-St-Zip:

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 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 an address, with all other like empowered.

SIGNATURE: VALERIE CAVALLARO D, T 03/08/2005