

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006430

FILED
Mar 03, 2006
Secretary of State

Entity Name: THE TAKE HEED THEATER COMPANY, INC.

Current Principal Place of Business:

PO BOX 540341
LAKE WORTH, FL 33454

New Principal Place of Business:

Current Mailing Address:

PO BOX 540341
LAKE WORTH, FL 33454

New Mailing Address:

FEI Number: 35-2234442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTLER, DON
25 MISTY MEADOW DRIVE
BOYNTON BEACH, FL 334368938 US

Name and Address of New Registered Agent:

BUTLER, DON
113 ANDOVER DR
JUPITER, FL 33458 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:

03/03/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HYLAND, DAVID
Address: 7499 KINGSLEY COURT
City-St-Zip: LAKE WORTH, FL 33467

Title: D (X) Delete
Name: CATALA, JULIAN
Address: 12323 LACEWOOD LANE
City-St-Zip: WELLINGTON, FL 334144980

Title: D () Delete
Name: HYLAND, SAUNDRA
Address: 7499 KINGSLEY COURT
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Delete
Name: BUTLER, DON
Address: 25 MISTY MEADOW DRIVE
City-St-Zip: BOYNTON BEACH, FL 334368938

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: BUTLER, DON
Address: 113 ANDOVER DR
City-St-Zip: JUPITER, FL 33458

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SAUNDRA HYLAND

D

03/03/2006

Electronic Signature of Signing Officer or Director

Date