

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2006
Secretary of State

DOCUMENT# N05000001122

Entity Name: THEATREZONE INC.

Current Principal Place of Business:

10365 6TH STREET NORTH
NAPLES, FL 34108

New Principal Place of Business:

597 CORBEL DR.
NAPLES, FL 34110

Current Mailing Address:

10365 6TH STREET NORTH
NAPLES, FL 34108

New Mailing Address:

597 CORBEL DR.
NAPLES, FL 34110

FEI Number: 25-1917144

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANNI, MARK
10365 6TH STREET NORTH
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

DANNI, MARK
597 CORBEL DR.
NAPLES, FL 34110 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: MARK DANNI

04/08/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PHILLIPS, PAUL
Address: 255 13TH AVENUE SOUTH #301
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: STRONG, KIRSTY KNUDSEN
Address: 1937 TIMBERLINE DRIVE
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: KOLACZ, KATHLEEN
Address: 5235 TUDOR COURTNEY
City-St-Zip: NAPLES, FL 34112

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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 () Change (X) Addition
Name: GOODSIGHT, LARRY
Address: 922 VILLA FLORENZA DR.
City-St-Zip: NAPLES, FL 34119

Title: D () Change (X) Addition
Name: PETRAS, FRANK
Address: 776 WILLOW BROOK DR. #803
City-St-Zip: NAPLES, FL 34108

Title: D () Change (X) Addition
Name: RHODES, ROSALIE
Address: 4260 JACK FROST COURT #3
City-St-Zip: NAPLES, FL 34112

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: MARK DANNI

D

04/08/2006

Electronic Signature of Signing Officer or Director

Date