

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001122

FILED
Jan 11, 2010
Secretary of State

Entity Name: THEATREZONE INC.

Current Principal Place of Business:

597 CORBEL DR.
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

597 CORBEL DR.
NAPLES, FL 34110

New Mailing Address:

FEI Number: 25-1917144

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

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

Title: D
Name: ELLEMAN, MICHAEL
Address: 1154 CAMELOT CIRCLE
City-St-Zip: NAPLES, FL 34119

Title: D
Name: OWENS, SUSAN
Address: 241 BAYFRONT DR.
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D
Name: MURRELL, STACEY
Address: 2827 SILVERLEAF LN
City-St-Zip: NAPLES, FL 34105

Title: D
Name: STEVENS, DAVID
Address: 73 CARRIBBEAN ROAD
City-St-Zip: NAPLES, FL 34108

Title: D
Name: DANNI, MARK
Address: 597 CORBEL DR.
City-St-Zip: NAPLES, FL 34110

I hereby 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 all other like empowered.

SIGNATURE: ELLEN ELLEMAN

MD

01/11/2010

Electronic Signature of Signing Officer or Director

Date