

N09000003210

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TALLAHASSEE, FLORIDA

Amend
C.COULLIETTE

June 05 2009

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Encore Ensemble Theater, Inc. +

DOCUMENT NUMBER: N09000003210 +

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JACKI DOXEY

(Name of Contact Person)

(Firm/ Company)

8064 W RITA LN

(Address)

HOMOSASSA FL 34446 US

(City/ State and Zip Code)

For further information concerning this matter, please call:

JACKI DOXEY

(Name of Contact Person)

at (352) 628-3492

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ENCORE ENSEMBLE THEATER, INC.

DOCUMENT NUMBER: N09000003210

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JACKI, DOXEY

(Name of Contact Person)

(Firm/ Company)

8064 W RITA LN

(Address)

HOMOSASSA FL 34446 US

(City/ State and Zip Code)

doxey58@tampabay.rr.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacki Doxey

(Name of Contact Person)

at (352) 628-3492

(Area Code & Daytime Telephone Number)

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P.O. Box 6327
Tallahassee, FL 32314

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Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RECEIVED
2009 JUN -4 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 14, 2009

JACKI DOXEY
8064 W. RITA LN
HOMOSASSA, FL 34446

SUBJECT: ENCORE ENSEMBLE THEATER INC
Ref. Number: N09000003210

We have received your document for ENCORE ENSEMBLE THEATER INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You have used the wrong form for a non profit amendment. Please submit the correct form to my attention and I will process it as soon as it is received.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette
Regulatory Specialist II

Letter Number: 809A00016421

Articles of Amendment
to
Articles of Incorporation
of

FILED
09 JUN -5 AM 10:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Name of Corporation as currently filed with the Florida Dept. of State)

ENCORE ENSEMBLE THEATER INC

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

SHIRLEY KISNER

P.O. Box 2763

CRYSTAL RIVER, FL 3423

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

_____, Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

(Attach additional sheets, if necessary)

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

[illegible]

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Title Name

Title	Name	Address	Type of Action
S D	SHIRLEY KISNER	7531 N CAESAR PT DUNNELLON, FL 34433	ADD
VP D	MIKEY SHIER, PRODUCTION	3912 W FEATHEREDGE CT LECANTO, FL 34461	ADD
VP D	ASHLEY KISNER, TELECOMMUNICATIONS	7531 N. CAESAR PT. DUNNELLON, FI 34433	ADD
VP D	JERI AUGUSTINE EXECUTIVE PRODUCER	1209 S E PARADISE CRYSTAL RIVER, FL 34429	ADD
D	JAN HUNT	1601 SE 8th AVE, LOT 36 CRYSTAL RIVER, FL 3428	ADD
D	MIKE TRANCHIDA	5077 ELWOOD RD. SPRING HILL, FL 34608	ADD

The date of each amendment(s) adoption: APRIL 25, 2009

Effective date if applicable: APRIL 25, 2009

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

- ☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated APRIL 25, 2009

Signature

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

JACKI DOXEY

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)