

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90275 037 ****70.00

DOCUMENT # N15927 1. Entity Name ASOLO THEATRE, INC.					
Principal Place of Business 5555 NORTH TAMiami TRAIL SARASOTA, FL 34243			Mailing Address 5555 NORTH TAMiami TRAIL SARASOTA, FL 34243		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2717909	
5. Certificate of Status Desired ☒				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
DIGABRIELE, LINDA 5555 N. TAMiami TRAIL SARASOTA, FL 34243				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HARTENSTINE, MICHAEL 5555 N TAMiami TRAIL SARASOTA, FL 34243	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT E. NANCY MARKLE 5555 N. TAMiami TRAIL SARASOTA, FL 34243	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VPD MARKLE, E. NANCY 5555 N TAMiami TRAIL SARASOTA, FL 34243	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1 ST VICE PRESIDENT MARGARET WISE 5555 N. TAMiami TRAIL SARASOTA, FL 34243	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KURLAND, ALAN 5555 N TAMiami TRAIL SARASOTA, FL 34243	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER DOUGLAS BRADBURY 5555 N. TAMiami TRAIL SARASOTA, FL 34243	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VPD KURLAND, ALAN 5555 N TAMiami TRAIL SARASOTA, FL 34243	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3VPD PORTNOY, SIMON 5555 N. TAMiami TRAIL SARASOTA, FL 34243	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3 RD VICE PRESIDENT SUSAN BUCK 5555 N. TAMiami TRAIL SARASOTA, FL 34243	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GARLINGTON, ANN 5555 N. TAMiami TRAIL SARASOTA, FL 34243	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY HARRIS SILVER 5555 N. TAMiami TRAIL SARASOTA, FL 34243	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: <i>Walker Cruskey</i> WALKER CRUSKEY SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			1/7/06 (941) 351-9010 Daytime Phone		