2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

1/2

FILED
Feb 21, 2003 8:00 am
Secretary of State
01-29-2003 90292 049 ****70.00

DOCUMENT # N15927

1. Entity Name
ASOLO THEATRE, INC.

Principal Place of Business	Mailing Address
5555 NORTH TAMIAMI TRAIL SARASOTA FL 34243	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

☑ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-2717909 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

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 GREENBAUM, RON 5555 N TAMIAMI TRAIL SARASOTA FL 34243 DIRECTOR	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SUSAN BUCK 1ST VP 5555 N. TAMIAMI TRAIL SARASOTA, FLORIDA 34243 DIRECTOR	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WISE, MARGARET 5555 N TAMIAMI TRAIL SARASOTA FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	2ND VP HOWARD PHILLIPS 5555 N. TAMIAMI TR. SARASOTA, FL. 34243 DIRECTOR	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PENDER, MICHAEL 5555 N TAMIAMI TRAIL SARASOTA FL 34243 DIRECTOR	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	3RD VP FLOAZ ROBERTS 5555 N. TIAMIAMI TR SARASOTA, FL 34243 DIRECTOR	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BUCK, SUSAN 5555 N TAMIAMI TRAIL SARASOTA FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	E. NANCY MARKLE - SECRETARY 5555 N. TAMIAMI TRAIL SARASOTA, FL. 34243 DIRECTOR	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Deborah Walker CASHIER 1/23/03 (941) 351-9010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 4402