

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003838

FILED  
Mar 18, 2008  
Secretary of State

Entity Name: ATLANTIC BEACH EXPERIMENTAL THEATRE, INC.

**Current Principal Place of Business:**

716 OCEAN BLVD.  
ATLANTIC BEACH, FL 32233

**New Principal Place of Business:**

**Current Mailing Address:**

1015 ATLANTIC BLVD., #175  
ATLANTIC BEACH, FL 32233

**New Mailing Address:**

FEI Number: 59-3212409      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GLEIT, ALAN  
10 TENTH STREET UNIT 32  
ATLANTIC BEACH, FL 32233      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: PD ( ) Delete  
Name: SHADWELL, PERCY  
Address: 3308 QUEEN PALM DR  
City-St-Zip: JACKSONVILLE, FL 32250

Title: TD ( ) Delete  
Name: GLEIT, ALAN  
Address: 10 TENTH STREET, UNIT 32  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: SD ( ) Delete  
Name: MAIDA, GEORY  
Address: 884 EAST COAST DRIVE  
City-St-Zip: ATLANTIC BEACH, FL 32233

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MAIDA, GEORGE  
Address: 884 EAST COAST DRIVE  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: RIGSBEE, CLIFF  
Address: 118 FLEET LANDING BLVD  
City-St-Zip: ATLANTIC BEACH, FL 32233

I hereby certify that the information supplied with this filing does not qualify 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: CLIFF RIGSBEE

D

03/18/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date