

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001205

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: RTC ENTERTAINMENT, INC.

**Current Principal Place of Business:**

742 CLAY STREET  
STE C  
WINTER PARK, FL 32789

**New Principal Place of Business:**

225 N KENNEL RD  
SANFORD, FL 32773

**Current Mailing Address:**

742 CLAY STREET  
STE C  
WINTER PARK, FL 32789 US

**New Mailing Address:**

PO BOX 609138  
ORLANDO, FL 32860 US

FEI Number: 59-3443654

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLESHER, NANCY R  
229 ALMA STREET  
KISSIMMEE, FL 34741 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: MANNO, JOSEPH D  
Address: 742 CLAY ST. SUITE C  
City-St-Zip: WINTER PARK, FL 32789

Title: VSD ( ) Delete  
Name: DE ROSA, ANTHONY  
Address: 742 CLAY ST. SUITE C  
City-St-Zip: WINTER PARK, FL 32789

Title: D ( ) Delete  
Name: INELLO, ROBERT  
Address: 187 BASS POINT RD  
City-St-Zip: NAHANT, MA 01908

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

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

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

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

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: ANTHONY DEROSA

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04/29/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date