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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N98000005896**

1. Corporation Name
MAD COW THEATRE, INC.

497841 - 90002 - 3

Principal Place of Business	Mailing Address
146 ORANGE PLACE MAITLAND FL 32751	2010 HARRISON AVE. ORLANDO FL 32804

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 10/15/1998
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number ☒ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip / Country 24 / 25	Zip / Country 29 / 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

BRUNER, TRUDY
2010 HARRISON AVE.
ORLANDO FL 32804

10. Name and Address of New Registered Agent

81 Name: Bruner, Trudy
82 Street Address (P.O. Box Number is Not Acceptable): 2010 Harrison Avenue
83
84 City: Orlando FL 85 Zip Code: 32804

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: X Trudy Bruner — DATE: 4/30/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	BRUNER, RICK		1.2 NAME	Bruner, Trudy	
STREET ADDRESS	2010 HARRISON AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32804		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	STANLEY, RICK		2.2 NAME		
STREET ADDRESS	411 FLETCHER PLACE		2.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL 32789		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	BLACKWELL, RUS		3.2 NAME		
STREET ADDRESS	1914 FLORINDA DR.		3.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32804		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	BRUUN, ALAN		4.2 NAME		
STREET ADDRESS	9701 WILD OAK DR.		4.3 STREET ADDRESS		
CITY-ST-ZIP	WINDERMERE FL 34786		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	NEAL, DENNIS		5.2 NAME		
STREET ADDRESS	103 WHITLEY BAY LANE		5.3 STREET ADDRESS		
CITY-ST-ZIP	LONGWOOD FL 32779		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X Trudy Bruner — 4/30/99 — (407) 648-2313
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)