2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001122

Entity Name: THEATREZONE INC.

Current Principal Place of Business:

13275 LIVINGSTON RD. NAPLES. FL 34109

Current Mailing Address:

2430 VANDERBILT BEACH RD. SUITE 108-167

NAPLES, FL 34109 US

FEI Number: 25-1917144 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DANNI, MARK 504 CHATHAM CIRCLE NAPLES, FL 34110 US

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

FILED Feb 09, 2019

Secretary of State

2889142996CC

Officer/Director Detail:

TitleSECRETARYTitlePRESIDENTNameOWENS, SUSANNameSTEVENS, DAVIDAddress241 BAYFRONT DR.Address2129 MISSION DRIVE

City-State-Zip: BONITA SPRINGS FL 34134 City-State-Zip: NAPLES FL 34109

Title D Title DIRECTOR

Name DANNI, MARK Name BATISTA, TERE

Address 504 CHATHAM CIRCLE Address 1864 ALAMANDA DRIVE

City-State-Zip: NAPLES FL 34110 City-State-Zip: NAPLES FL 34102

Title VP Title DIRECTOR

Name ELLEN, ELLEMAN Name REBECCA, GUST

Address PO BOX 304 Address 1707 THIRD STREET SOUTH

City-State-Zip: ISLE OF PALMS SC 29451 City-State-Zip: NAPLES FL 34102

Title DIRECTOR Title TREASURER

NameCONROY, CAITLINNameSALVAGIO, RONALDAddress85 CARIBBEAN ROADAddress14479 MARSALA WAYCity-State-Zip:NAPLES FL 34108City-State-Zip: NAPLES FL 34109

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I hereby 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 all other like empowered.

SIGNATURE: MARK DANNI ARTISTIC DIRECTOR 02/09/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name MULLIN, PATRICK

Address 275 INDIES WAY

#1103

City-State-Zip: NAPLES FL 34110

Title DIRECTOR

Name HAZELBAKER, LEIGH Address 13411 SILKTAIL DRIVE

City-State-Zip: NAPLES FL 34109

Title DIRECTOR

Name MCCOY, THOMAS

Address 260 BAREFOOT BEACH BLVD

402

City-State-Zip: BONITA SPRINGS FL 34134