

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000003232

**FILED**  
**Jan 10, 2014**  
**Secretary of State**  
**CC4083862674**

**Entity Name:** A CLASSIC THEATRE, INC

**Current Principal Place of Business:**

30 MAGNOLIA DUNES CIRCLE  
ST AUGUSTINE, FL 32080

**Current Mailing Address:**

30 MAGNOLIA DUNES CIRCLE  
ST AUGUSTINE, FL 32080

**FEI Number:** 56-2666987

**Certificate of Status Desired:** Yes

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

RAHNER, JEAN A  
30 MAGNOLIA DUNES CIRCLE  
ST AUGUSTINE, FL 32080 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

**Officer/Director Detail :**

Title P  
Name RAHNER, JEAN A  
Address 30 MAGNOLIA DUNES CIRCLE  
City-State-Zip: ST AUGUSTINE FL 32080

Title VP  
Name KRAFT, ANNE  
Address 968 ARAGON AVENUE  
City-State-Zip: ST AUGUSTINE FL 32086

Title S  
Name DICKEY, DEBORAH  
Address 31 LOCKHART LANE  
City-State-Zip: ST AUGUSTINE FL 32080

Title T  
Name CURTIS, ANNE  
Address 1717 KESWICK ROAD  
City-State-Zip: ST AUGUSTINE FL 32084

*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:** ANNE CURTIS

**TREASURER**

**01/10/2014**

Electronic Signature of Signing Officer/Director Detail

Date