

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000084761

**FILED**  
**Apr 27, 2013**  
**Secretary of State**  
**CC5237117458**

**Entity Name:** CHRONOS PRODUCTIONS MOTION PICTURE STUDIOS  
INCORPORATED

**Current Principal Place of Business:**

404 UNIVERSITY BLVD  
DAYTONA BEACH, FL 32118

**Current Mailing Address:**

P O BOX 730733  
ORMOND BEACH, FL 32173 US

**FEI Number: 61-1694582**

**Certificate of Status Desired: Yes**

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

NASH, PATRICIA L  
404 UNIVERSITY BLVD  
DAYTONA BEACH, FL 32118 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 D'ANTHONY, DONALD B  
Address 404 UNIVERSITY BLVD  
City-State-Zip: DAYTONA BEACH FL 32118

Title VP  
Name NASH, PATRICIA L  
Address 404 UNIVERSITY BLVD  
City-State-Zip: DAYTONA BEACH FL 32118

Title EP  
Name LEOPOLD, STRATTON  
Address 212 E BROUGHTON ST  
City-State-Zip: SAVANNAH GA 31401

Title AP  
Name WOOD, SHANE  
Address P O BOX 911416  
City-State-Zip: ST.GEORGE UT 84791

Title VP  
Name THACKER, NEIL  
Address 360 MADSEN RD  
City-State-Zip: KELOWNA BC V1X2C-2

Title VP  
Name MONTAGUDO, GABRIEL  
Address 62 LUNDEVEIEN  
City-State-Zip: MYSEN NO 1850

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: PATRICIA NASH**

**VP**

**04/27/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date