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FILED
Apr 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 727470 (7)
1. Corporation Name
Childrens Community Theater, Inc.

Principal Place of Business	Mailing Address
11 Orange Ave Rockledge, Fl. 32955	11 Orange Avenue Rockledge, Fl. 32955

3. Date Incorporated or Qualified
09/17/1973

4. FEI Number 59-1612760	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

9. Name and Address of Current Registered Agent

Sehnem, Danette
1131 Wentworth Cr.
Rockledge, Fl. 32955

10. Name and Address of New Registered Agent

81 Name Debbie Kocol
82 Street Address (P.O. Box Number is Not Acceptable) 1828 Laurel Oaks Dr. S.
83
84 City Rockledge
85 Zip Code FL 32955

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

Deborah S. Kocol

Signature, typed or printed name of registered agent, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	NAME
PD	Sehnem, Danette
STREET ADDRESS	1131 Wentworth Cr.
CITY-ST-ZIP	Rockledge, Fl.
TITLE	NAME
TD	Kocol, Debbie
STREET ADDRESS	1828 Laurel Oaks Drive S.
CITY-ST-ZIP	Rockledge, Fl.
TITLE	NAME
SD	Julia Bull
STREET ADDRESS	1575 Tuna Street
CITY-ST-ZIP	Merritt Island, Fl.
TITLE	NAME
BD	Sandy McPharland
STREET ADDRESS	887 Yorktowne
CITY-ST-ZIP	Rockledge, Fl.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	BD
1.2 NAME	Tom Murdoch
1.3 STREET ADDRESS	1335 Rockledge Dr.
1.4 CITY-ST-ZIP	Rockledge, Fl.
2.1 TITLE	
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E037 (10/97)