FILED 2002 UNIFORM BUSINESS REPORT (UBR) Jul 16, 2002 8:00 am DOCUMENT # 727470 Secrétary of State 1. Entity Name 07-16-2002 90384 001 ****61.25 CHILDRENS' COMMUNITY THEATER, INC. 07-16-2002 90384 002 *****8.75 Principal Place of Business Mailing Address 11 ORANGE AVENUE 11 ORANGE AVENUE ROCKLEDGE FL 32955 ROCKLEDGE FL 32955 3. Mailing Address 2. Principal Place of Business 234 Willard St. 234 WillardSt Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Surte D Applied For 4. FEI Number City & State FL 59-1612760 Cocoa Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired UŚA 32922 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent render PURPOU Street Address (P.O. Box Number is Not Acceptable) **BULL. JULIA** 1695 MISTY DAWN LANE **MERRITT ISLAND FL 32952** 8. The above named entity submits this statement for the purpose of changing its registered office or registered agen), or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) After September 13, 2002, 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. min. will be \$236.25. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. PD Addition PD Delete TITLE ☐ Change TITLE Fender, Northy 467 Stone hodge Cir NAME NAME BULL, JULIA STREET ADDRESS STREET ADDRESS 1695 MISTY DAWN LN CITY-ST-ZIP Prockledge, PC 37955 CITY-ST-ZIP MERRITT ISLAND FL 32952 Change Addition Delete TITLE TET) F Strom April 2000 Dr. NAME NAME KIDD, LORIE STREET ADDRESS STREET ADDRESS 733 WHITE PINE AV CITY-ST-ZIP CITY-ST-Z)P Accidedae Fl 32955 ROCKLEDGE FL 32955 Addition Change Delete Secretary SD TITLE welch, Helen NAME PRECIADO, BEVERLY NAME 1322 woodingham Dr STREET ADDRESS STREET ADDRESS 1246 WALNUT GROVE WAY CITY-ST-ZIP CITY-ST-ZIP <u>frackledge FC</u> **ROCKLEDGE FL 32955** Addition Treasurer Delete TITLE ☐ Change TITLE TD Dubais Ronald NAME NAME BRADLEY, JODI STREET ADDRESS POBOX 560218 STREET ADDRESS 3060 N ATLANTIC AV Pockledge FL 32956-0218 CITY-ST-ZIP CITY-ST-ZIP <u>COCOA BEACH FL 32931</u> - Delete Board member - enange Addition TITLE BD TITLE NAME Kidd, Lonie NAME WELSH, HELEN 733 White Pine Ave STREET ADDRESS STREET ADDRESS 1322 WOODINGHAM DR CITY-ST-ZIP CITY-ST-ZIP Puckledge FL 37955 ROCKLEDGE FL 32955 Board member Lostroscio, Jahala Delete ☐ Change ddition TITI F TITLE BD

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 149.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

C!TY-ST-ZIP

SIGNATURE:

DURRANCE, BECKY

770 SKERRY DOWN CIR

MELBOURNE FL 32940

NAME

STREET ADDRESS

CITY-ST-ZIP

6-9-2009

hockledge FL 32955

981 Brill Way