

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730160

FILED  
Apr 30, 2012  
Secretary of State

**Entity Name:** THE FLORIDA MOTION PICTURE & TELEVISION ASSOCIATION, INC.

**Current Principal Place of Business:**

630 MUSCOVY CIRCLE  
SUITE D  
DELAND, FL 32720 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4132  
DELAND, FL 32721 US

**New Mailing Address:**

P.O. BOX 4132  
DELAND, FL 32721 US

**FEI Number:** 59-2301231

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NESMITH, LINDA  
630 MUSCOVY CIRCLE  
SUITE D  
DELAND, FL 32720 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: MITCHELL, THOMAS P SR.  
Address: 630 D MUSCOVY CIRCLE, SUITE D  
City-St-Zip: DELAND, FL 32720 US

Title: EVP  
Name: CHRIS, HOCH  
Address: 630 MUSCOVY CIRCLE, SUITE D  
City-St-Zip: DELAND, FL 32720 US

Title: VP  
Name: AYOTTE, MATT  
Address: 630 MUSCOVY , SUITE D  
City-St-Zip: DELAND, FL 32720 US

Title: TREA  
Name: NESMITH, LINDA  
Address: 630 MUSCOVY CIRCLE, SUITE D  
City-St-Zip: DELAND, FL 32720

Title: SEC  
Name: HOCH, AMANDA  
Address: 630 MUSCOVY CIRCLE, SUITE D  
City-St-Zip: DELAND, FL 32720 US

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: LINDA. K. NESMITH

TREA

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date