

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Jul 25, 2007  
Secretary of State

DOCUMENT# 738989

Entity Name: OPEN THEATRE, INC.

**Current Principal Place of Business:**

2642-2 ROSSELLE ST  
JACKSONVILLE, FL 32204

**New Principal Place of Business:**

**Current Mailing Address:**

2642-2 ROSSELLE ST  
JACKSONVILLE, FL 32204

**New Mailing Address:**

FEI Number: 59-1802591      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MC CORMMICK EDWARD J  
2642-2 ROSSELLE ST  
JACKSONVILLE, FL 32204      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: PD      ( ) Delete  
Name: DAVIS, CAROL  
Address: 321 W 6TH STREET  
City-St-Zip: JACKSONVILLE, FL 32206

Title: VD      ( ) Delete  
Name: LIVINGSTONE, ALICE  
Address: 7925 NERRUKK RDT  
City-St-Zip: JACKSONVILLE, FL 32227

Title: STD      ( ) Delete  
Name: WHITE, CHRISTIANNA  
Address: 2642-2 ROSSELLE ST  
City-St-Zip: JACKSONVILLE, FL 32204

Title: MD      ( ) Delete  
Name: MC CORMICK, EDWARD L  
Address: 2642-2 ROSSELLE ST  
City-St-Zip: JACKSONVILLE, FL 32204

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MR.      ( ) Change (X) Addition  
Name: MC CORMICK, EDWARD J  
Address: 2642-2 ROSSELLE STREET  
City-St-Zip: JACKSONVILLE, FL 32204 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EDWARD J. MC CORMICK

Electronic Signature of Signing Officer or Director

MR.

07/25/2007

Date