2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 747785

1. Entity Name

CALDWELL THEATRE COMPANY, INC.



Jan 31, 2003 8:00 am Secretary of State 01-31-2003 90132 040 ****61.25

CALDWELL HILATHE COME ANT IN	.		The state of the s					
Principal Place of Business 7873 N FEDERAL HWY BOCA RATON FL 33487 US	RAL HWY 7873 N FEDERAL HWY					1.11	11. 81.8 11 1 1.8 1	
Principal Place of Business 3. Mailing Address								
Suite, Apt. #, etc.	e, Apt. #, etc. Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & State	State City & State			4. FEI Number 59-1929742 Applied For Not Applied be				
Zip Country	Zip Country			5. Certificate of Status Desired See Required				
6. Name and Address of Curre	nt Registered Agent	<u> </u>		7. Name and	Address of New Re	· · · · · · · · · · · · · · · · · · ·	-	
	· · · · · · · · · · · · · · · · · · ·	Name	mb					
MCCARTHY, WILLIAM E		Stroo		as Salzma				
2263 NW 2ND AVENUE			Street Address (P.O. Box Number is Not Acceptable) 2711 S. W. 7th Street					
# 104		Dan		D 5-				
BOCA RATON FL 33431	City_	<u>rnton l</u>	<u> </u>		FL Zip Cod	e		
		Boy	nton I	Beach		FE 334	435	
8. The above named entity submits this statement	for the purpose of changing its	s registered office	e or register	red agent, or bot	h, in the State of Floi	rida. I am familiar with,	and accept	
the obligations of registered agent.							İ	
SIGNATURE IN THE STATE OF	X Com n	_			/	1-7-0a		
SIGNATURE Signature, typed or printed name of registered age	ent and title if applicable. (NOT	TE: Registered Agent sig	nature required	when reinstating)		DATE		
					<u> </u>	· · · · · · · · · · · · · · · · · · ·		
FILE NOW: FEE IS \$61.25	1	mpaign Financing	9 🗆	\$5.00 May B		e Check Payable a Department of S		
É	, and the second		_	74000 10 1 005	110114	a bepariment of t	Juic .	
10. OFFICERS AND	DIRECTORS	11.	,	ADDITIONS/CHA	ANGES TO OFFICER	RS AND DIRECTORS IN	l 10	
TITLE! STR	☐ Delete	TITLE				☐ Change	☐ Addition	
NAME TAYLOR, ROBERT		NAME						
STREET ADDRESS 22952 IRONWEDGE DR.		STREET ADDRES	SS					
CITY-ST-ZIP BOCA RATON FL 33433		CITY-ST-ZIP						
TITLE PTR	☐ Delete	TITLE				☐ Change	☐ Addition	
NAME HALL, MICHAEL P		NAME						
STREET ADDRESS 3127 SHERWOOD BLVD		STREET ADDRES	SS					
DELRAY BCH FL 33445		CITY-ST-ZIP						
TITLE CTR NAME BERGER, MURRY	Delete	TITLE		F + 1.		- Change	☐ Addition	
STREET ADDRESS 2050 ROYAL PALM WAY		NAME STREET ADDRES	ร 4กก	S E 5+	h Avenue,	#706 North	:	
CITY-ST-ZIP BOCA RATON FL 33432		CITY-ST-ZIP	~ 100	J. 2. J.	in invende,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
TITLE TTR	Delete	TITLÉ				☐ Change	Addition	
NAME FEIGL, KENNETH	_ Dileis	NAME				_ ,		
STREET ADDRESS 7402 PANACHE WAY		STREET ADDRES	SS					
CITY-ST-ZIP BOCA RATON FL 33433		CITY-ST-ZIP						
TITLE	☐ Delete	TITLE				Change	Addition	
NAME		NAME	1					
STREET ADDRESS		STREET ADDRES	SS				1	
CITY-ST-ZIP		CITY-ST-ZIP	-				[] A A 200	
TITLE	☐ Delete	TITLE				☐ Change	Addition	
NAME STREET ADDRESS		NAME STREET ADDRES	: :				}	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	~					
12. I hereby certify that the information supplied w	ith this filing does not qualify fo				Charledo Chatutan I	fushar and if that the i	-f	

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.