

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 753708

FILED
Oct 20, 2010
Secretary of State

Entity Name: ACROSSTOWN REPERTORY THEATRE WORKSHOP, INC.

Current Principal Place of Business:

619 SOUTH MAIN STREET
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 12254
GAINESVILLE, FL 32604 US

New Mailing Address:

FEI Number: 59-2737556

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STERN, CASEY
3800 SW 34TH ST APT DD302
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

STERN, CASEY
1315 NE 7TH TERRACE
GAINESVILLE, FL 32601 US

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: CASEY STERN

10/20/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: TERRELL, ANGELA
Address: 4508 E UNIVERSITY
City-St-Zip: GAINESVILLE, FL 32601

Title: ST
Name: BIGGS, ESTHER
Address: 427 NW 10TH AVE
City-St-Zip: GAINESVILLE, FL 32601

Title: CD
Name: STERN, CASEY
Address: 1315 NE 7TH TERRACE
City-St-Zip: GAINESVILLE, FL 32601

Title: D
Name: GABBARD, PAUL
Address: 619 1/2 UPPER MAUPAS AVE.
City-St-Zip: SAVANNAH, GA 31401

Title: D
Name: JONES, BOBBY
Address: 1302 NE 20TH PLACE
City-St-Zip: GAINESVILLE, FL 32609

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: R. CASEY STERN

ST

10/20/2010

Electronic Signature of Signing Officer or Director

Date