2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753708

FILED Mar 04, 2011 Secretary of State

Entity Name: ACROSSTOWN REPERTORY THEATRE WORKSHOP, INC.

New Principal Place of Business: Current Principal Place of Business:

619 SOUTH MAIN STREET GAINESVILLE, FL 32601

Current Mailing Address: New Mailing Address:

P.O. BOX 12254

GAINESVILLE, FL 32604 US

FEI Number: 59-2737556 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STERN, CASEY LASLEY, CINDY

1057 SW 11 TERRACE 1315 NÉ 7TH TERRACE

US GAINESVILLE, FL 32601 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: CINDY LASLEY 03/04/2011

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

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

Title:

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

Title:

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

Title: VΡ

Name: GABBARD, PAUL

619 1/2 UPPER MAUPAS AVE. Address:

City-St-Zip: SAVANNAH, GA 31401

Title:

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

Title:

LASLEY, CINDY Name: Address: 1057 SW 11 TERRACE GAINESVILLE, FL 32601 City-St-Zip:

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.

Ρ SIGNATURE: CINDY LASLEY 03/04/2011