

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 762978

1. Entity Name

SHOESTRING THEATRE, INC.

**FILED**  
**Apr 19, 2000 8:00 am**  
**Secretary of State**

04-19-2000 90088 027 \*\*\*\*61.25

Principal Place of Business

Mailing Address

380 S GOODWIN ST.  
380 S. GOODWIN ST.  
LAKE HELEN FL 32744-2803  
US

380 S. GOODWIN ST.  
380 S. GOODWIN ST.  
LAKE HELEN FL 32744-2803  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-6004241

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PEARCE, RICHARD W.  
701 N TUXEDO AVE.  
DELAND FL 32724

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Delete  
NAME ~~HANSTINE, PETE~~  
STREET ADDRESS ~~169 N. PREVATT AVE.~~  
CITY-ST-ZIP ~~LAKE HELEN FL 32744~~

TITLE **D** ☐ Change ☐ Addition  
NAME **JIM CARA**  
STREET ADDRESS **447 W. RICH AVE**  
CITY-ST-ZIP **DELAND, FL. 32720-4169**

TITLE **D** ☐ Delete  
NAME **STAFFORD, RON**  
STREET ADDRESS **339 ALEMANDER AVE**  
CITY-ST-ZIP **DEBARY FL 32713**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☒ Delete  
NAME ~~SOLLEN, ROBERT K~~  
STREET ADDRESS ~~435 W WISCONSIN AVE~~  
CITY-ST-ZIP ~~DELAND FL 32720~~

TITLE **D** ☐ Change ☐ Addition  
NAME **WAYNE LAWSON**  
STREET ADDRESS **860 TAPPAN CIRCLE**  
CITY-ST-ZIP **ORANGE CITY FL. 32763-4852**

TITLE **TD** ☐ Delete  
NAME **MILLER, DAVID W.**  
STREET ADDRESS **1236 W. NEW YORK**  
CITY-ST-ZIP **DELAND FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☒ Delete  
NAME ~~WOODARD, FRANCES~~  
STREET ADDRESS ~~1230 GLENWOOD RD.~~  
CITY-ST-ZIP ~~DELAND FL~~

TITLE **D** ☐ Change ☐ Addition  
NAME **JACKIE SELBY**  
STREET ADDRESS **399 PARADISE LN**  
CITY-ST-ZIP **DELAND FL. 32720-8840**

TITLE **V** ☒ Delete  
NAME ~~SCOTT, MIKE~~  
STREET ADDRESS ~~138 N. KENTUCKY AVE.~~  
CITY-ST-ZIP ~~DELAND FL 32724~~

TITLE **V** ☐ Change ☐ Addition  
NAME **MARSHALL LEE**  
STREET ADDRESS **27 ROSE DOWN BLVD.**  
CITY-ST-ZIP **DEBARY FL. 32713-4110**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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.

SIGNATURE:

*DAVID W. MILLER* **DAVID W. MILLER** 4/12/00 904.734.8764

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)

# SHOESTRING THEATRE, INC.

TELEPHONE (904) 228-3777

*q Hach  
C006576  
#762928*

380 S. GOODWIN ST.  
LAKE HELEN, FL. 32744

## CORPORATE ANNUAL REPORT 2000 UNIFORM BUSINESS REPORT

### ITEM 10, OFFICERS AND DIRECTORS

#### DELETE

President  
Dolores Foster  
334 N. Kentucky Ave.  
DeLand, Fl. 32724

Secretary  
Jim Neely  
600 N. Boundary Apt. 114B  
DeLand, Fl. 32720

#### CURRENT

Past President (Director)  
Delores Foster  
334 N. Kentucky Ave  
DeLand, Fl. 32724

President  
Jim Neely  
600 N. Boundary, Apt 114B  
DeLand, Fl. 32720

Secretary  
Tina Waddoups  
311 W. New York Ave.  
Lake Helen, Fl. 32744-2423

Director  
Julie Bolton  
2518 E Juliet Dr.  
Deltona, Fl. 32738-2430