

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000005983

**FILED  
Jan 11, 2007  
Secretary of State**

**Entity Name:** THEATRE SPECIALTY COMPANY

**Current Principal Place of Business:**

1853 3RD PLACE NE  
BIRMINGHAM, AL 35215

**New Principal Place of Business:**

**Current Mailing Address:**

1853 3RD PLACE NE  
BIRMINGHAM, AL 35215

**New Mailing Address:**

**FEI Number:** 63-1004672      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

AGENTS AND CORPORATIONS, INC.  
773 4TH AVENUE NORTH STE E  
NAPLES, FL 34102 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BROWN, JERRY D  
Address: 1853 3RD PLACE NE  
City-St-Zip: BIRMINGHAM, AL 35215

Title: VP ( ) Delete  
Name: MONTGOLF, LISA B  
Address: 7900 WHITE OAK CIRCLE  
City-St-Zip: PINSON, AL 35126

Title: S ( ) Delete  
Name: ALLINDER, K DENISE  
Address: 9253 CENTRAL ROAD  
City-St-Zip: WARRIOR, AL 35180

Title: T (X) Delete  
Name: BROWN, PATRICIA A  
Address: 1853 3RD PLACE NE  
City-St-Zip: BIRMINGHAM, AL 35215

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

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

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

Title: S/T (X) Change ( ) Addition  
Name: ALLINDER, K DENISE  
Address: 9253 CENTRAL ROAD  
City-St-Zip: WARRIOR, AL 35180

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

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISA MONTGOLF

VP

01/11/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date