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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

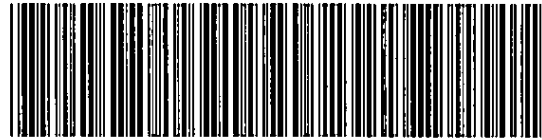
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Receive message
From Mrs. Kathie
RAUP she gave
permission to only
use one officer listed
4/18/19

Office Use Only

Mrs. Kathie she gave
Permission to use
Missoula Children's
to write The Attie, Inc.
4/22/19



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/22/19 YS ✓

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MCT, Inc.

Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Kathee Raup

Name of Person

MCT, Inc.

Firm/Company

200 N Adams

Address

Missoula, MT 59802

City/State and Zip Code

kraup@mctinc.org

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Kathee Raup

Name of Person

at (406)

Area Code

829-5223

Daytime Telephone Number

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**



\$70.00 Filing Fee



\$78.75 Filing Fee &
Certificate of Status



\$78.75 Filing Fee &
Certified Copy



\$87.50 Filing Fee,
Certificate of Status &
Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:

1. MCT, Inc.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

Missoula Children's Theatre, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Montana

(State or country under the law of which it is incorporated)

3. 81-0332120

(FEI number, if applicable)

4. March 15, 1972

(Date of incorporation)

5. _____

(Date of duration, if other than perpetual)

6. June 24, 2019

(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 200 N. Adams St., Missoula, MT 59802

(Principal office street address)

200 N. Adams St., Missoula, MT 59802

(Current mailing address, if different)

8. Touring Children's Theatre with mission of developing life skills in children through the participation in performing arts.

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Northwest Registered Agent LLC

Office Address: 7901 4th St N STE 300

St. Petersburg, Florida 33702

(City)

(Zip Code)

10. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Tom Glover

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

☐Chairman Name: Michael McGill
☐Vice Chairman Address: 200 N Adams
☐Director Missoula, MT 59802
☐President _____
☐Vice President _____
☐Secretary ☐Treasurer
☐Other: Officer ☐Other: _____

☐Chairman Name: _____
☐Vice Chairman Address: _____
☐Director _____
☐President _____
☐Vice President _____
☐Secretary ☐Treasurer
☐Other: _____ ☐Other: _____

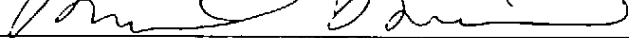
☐Chairman Name: _____
☐Vice Chairman Address: _____
☐Director _____
☐President _____
☐Vice President _____
☐Secretary ☐Treasurer
☐Other: _____ ☐Other: _____

☐Chairman Name: _____
☐Vice Chairman Address: _____
☐Director _____
☐President _____
☐Vice President _____
☐Secretary ☐Treasurer
☐Other: _____ ☐Other: _____

☐Chairman Name: _____
☐Vice Chairman Address: _____
☐Director _____
☐President _____
☐Vice President _____
☐Secretary ☐Treasurer
☐Other: _____ ☐Other: _____

☐Chairman Name: _____
☐Vice Chairman Address: _____
☐Director _____
☐President _____
☐Vice President _____
☐Secretary ☐Treasurer
☐Other: _____ ☐Other: _____

NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Michael McGill, Executive Director
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA



200 North Adams Street • Missoula, MT 59802 • (406) 728-1911 • fax (406) 721-0637
 www.mctinc.org • mct@mctinc.org

MCT Board Member

Mailing Address

Contact Information

Brendan Briggs – Secretary/Treasurer
 Commercial Lender.
 First Security Bank of Missoula

1704 Dearborn Avenue
 1704 Dearborn Avenue
 Missoula, MT 59801

Work – (406) 327-1038
 Cell – (406) 317-3823
BBriggs@fsbmsla.com

Catherine Capps
 Physician (retired)

10950 Horseback Ridge
 Missoula, MT 59804

Home – (406) 728-2550
 Cell - (406) -240-2550
blackdog@bigsky.net

Carolyn Overman

2202 Fox Hollow
 Missoula, Mt. 59802

Home - (406) -549-1634
 Cell - (406) -240-1630
coverman@bresnan.net

Craig Langel
 President, CLC Restaurants, Inc.

218 E. Front St Suite 300
 Missoula, MT 59802

Work - (406) -543-6454
craig@clcrest.com

David Cody
 Professor, School of Music
 The University of Montana
 32 Campus Drive
 Missoula, MT 59812

4815 Scott Allen Dr.
 Missoula, MT 59803

Home - (406) -721-7983
 Cell - (406) -544-2297
David.Cody@mso.umt.edu

Erin Steele
 Financial Advisor
 Flaherty Financial Services, Inc.

340 East Central Ave

Work - (406) -549-3112
esteele@sagepointadvisor.com

Julie Tomasik—Vice President
 District Manager,
 AAA Mountain West

1200 S Reserve St, Suite B
 Missoula, MT 59808

Work - (406) -829-5509
jtomasik@mtw.aaa.com

Katherine Green

535 S 4th St. West
 Missoula, MT 59801

Cell - (406) -381-3582
kcourt@gmail.com

Kim Visser

7400 Old Grant Creek Rd
 Missoula, MT 59808

Home - (406) -721-3559
 Cell - (406) -240-3559
 Lake - (406) -887-2223
kimberlevisser@aol.com

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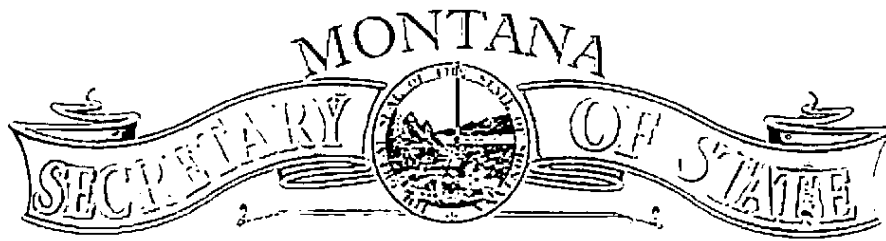
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 MISSOULA
 CLERK OF DISTRICT COURT
 JAMES A. HARRIS
 TALLAHASSEE, FLORIDA

2018/2019 MCT Board of Directors

2018/2019 MCT Board of Directors FILED

MCT Board Member	Mailing Address	Contact Information
Laura Bovard Missoula International School Director of Admissions and Marketing	1700 Streamside Ct Missoula, MT 59808	Home - (406) 721-0783 Cell - (406) 544-6933 lbovard@aol.com lbovard@mismt.org
Lauri Winters	5991 Wild Bird Ln Florence, MT 59833	Home - (406) 777-1583 Cell - (917) 692-4898 montanawinters@icloud.com
Linda Lennox	537 Woodford Missoula, MT 59801	Home - (406) 543-4170 lmlmissoula@msn.com
Mark Heyka Metecologist NBC Montana	17 Greenbrier Dr Missoula, MT 59802	Cell - (406) 543-4608 Work - (406) 523-0957 Markheyka@yahoo.com
Mary Oestreich	1069 Anglers Bend Way Missoula, MT 59802	Home (406) 542-7383 Cell (406) 370-9335 mdoestreich@gmail.com
Mike Morelli	428 Ford St. Missoula, MT 59801	Cell - (906) 281-2959 Work - (406) 243-5810 & (406) 243-5811 Mike.morelli@mso.umt.edu
Ryan A. Phelan Attorney, P. Mars Scott Law Offices	3204 Paul Ln Missoula, MT 59803	Cell - (406) 360-9359 Work - (406) 327-0600 Ryan.Phelan@pmarsscott.com
Sid Graef - President Owner, Spectrum, Inc. P.O. Box 18027 Missoula, MT 59808	2803 Duncan Dr Missoula, MT 59802	Cell - (406) 552-5997 sidgraef@gmail.com

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CERTIFICATE OF EXISTENCE

I, **COREY STAPLETON**, Secretary of State for the State of Montana, do hereby certify that:

MCT, INC.

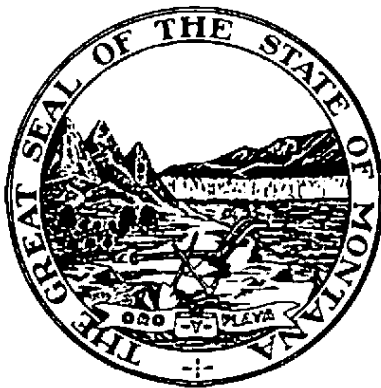
duly filed its Articles Of Incorporation for the domestic entity in this office on **March 15, 1972**, and on that date was authorized to transact business in this state for a term of Perpetual duration.

Payment is reflected in the records of the Secretary of State for all fees owed to the Secretary of State.

The most recent annual report has been filed with this office.

No articles of dissolution have been placed on record in this office by said corporation and the records indicate the corporation is in good standing under the laws of the State of Montana.

The Secretary of State cannot certify that tax and penalties owed to this state on record with the Department of Revenue are current. Please contact the Department of Revenue at (406) 444-6900 to obtain information on tax status.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of the State of Montana, at Helena, the Capital, this 3rd day of April, 2019.

COREY STAPLETON

Montana Secretary of State

Certificate Number: 040320190654

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SECRETARY OF STATE
GALLAHUE
FLORIDA