

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 16, 2002 8:00 am
Secretary of State

09-16-2002 90102 031 ****61.25

DOCUMENT # N00000001007

1. Entity Name

OCALA THEATER COMPANY, INC.

Principal Place of Business

Mailing Address

**1768 NE 7 ST
OCALA FL 34470**

**1768 NE 7 ST
OCALA FL 34470**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3622353

Applied For

Not Applicable

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

**JULIANO, SARA
1768 NE 7 ST
OCALA FL 34470**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**After September 13, 2002,
min. will be \$236.25.**

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 NAME STREET ADDRESS CITY-ST-ZIP	D SOLOGUREN, GEORGE 1409 NE 22ND AVE. OCALA FL 34470 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JULIANO, RALPH 1768 NE 7 ST OCALA FL 34470 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JULIANO, SARA D 1768 NE 7 ST OCALA FL 34470 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CR2E037 (4/02)

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: *Sara Juliano* REQUIRED

Attachments
GEORGE M. SOLOGUREN C.P.A.

1409 NE 22ND AVENUE
OCALA, FLORIDA 34470
(352) 690-6869
(352) 732-5673 FAX

September 13, 2002

Re: Ocala Theater Company, Inc.

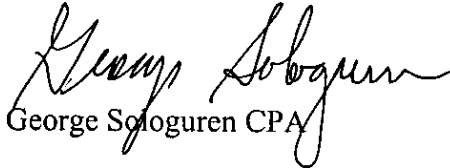
N00000001007

Secretary of State
Division of Corporation
PO Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

Enclosed is 2002 Uniform Business Report for the above named corporation. The company filed this report with your office in April of 2002 through the internet and funds were mailed to you on the same day. I spoke with a your representative this day and he informed me that that the filing did not get recorded and without the report the check would not have been cashed. My client verified that the check has never been cashed. I am therefore resubmitting the UBR along with a check for \$61.25. If you have any questions please give me a call.

Sincerely yours,


George Sologuren CPA