

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 14, 2005 8:00 am**  
**Secretary of State**

04-14-2005 90098 029 \*\*\*\*61.25

**DOCUMENT #** N00000005572

**1. Entity Name**

PLAYWRIGHTS' ROUND TABLE

**DO NOT WRITE IN THIS SPACE**

**2. Principal Place of Business**

2450 PLEASANT DR

Suite, Apt. #, etc.

**3. Mailing Address**

2450 PLEASANT DR

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

**City & State**

LONGWOOD, FL

**City & State**

LONGWOOD, FL

**4. FEI Number**

59-3733179

**Applied For**

Not Applicable

**Zip**

32779

**Country**

USA

**Zip**

32779

**Country**

USA

**5. Certificate of Status Desired** ☐

**\$8.75 Additional  
Fee Required**

**7. Name and Address of Current Registered Agent**

**Name** GORING, JOHN M.

**Street Address (P.O. Box Number is Not Acceptable)**  
2450 PLEASANT DRIVE

**City** LONGWOOD, **FL** **Zip Code** 32714

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IN THIS SPACE**

**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**

*John M. Goring*

Signature by: printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

*April 7, 2005*

DATE

**FEE IS \$61.25  
Initial or Amended UBR**

**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**

**TITLE** PRESIDENT  
**NAME** JOHN M. GORING  
**STREET ADDRESS** 2450 PLEASANT DR  
**CITY - ST - ZIP** LONGWOOD, FL 32779

**TITLE** VP  
**NAME** DAVID W. WOMBLE  
**STREET ADDRESS** 1984 SHADY HILL TERRACE  
**CITY - ST - ZIP** WINTER PARK, FL 32792

**TITLE** TREASURER  
**NAME** CHARLES R. DENT  
**STREET ADDRESS** 4696 Middlebrook Rd #J  
**CITY - ST - ZIP** OKLAHOMA, FL 32811

**TITLE** SECRETARY  
**NAME** NICOLE A. CARSON  
**STREET ADDRESS** 301 BAIFOUR DR. #311  
**CITY - ST - ZIP** WINTER PARK, FL 32792

**TITLE** —  
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IN THIS SPACE**

**12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.**

*John M. Goring*

*April 7, 2005 407-788-8468*

CR2E037B (12/01)