

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004389

FILED
Mar 28, 2011
Secretary of State

Entity Name: BOB CARTER'S ACTORS WORKSHOP & REPERTORY COMPANY, INC.

Current Principal Place of Business:

715 NORTH B ST.
LAKE WORTH, FL 33460

New Principal Place of Business:

Current Mailing Address:

715 NORTH B ST.
LAKE WORTH, FL 33460

New Mailing Address:

FEI Number: 65-1124489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBERT, CARTER
715 NORTH B STREET
LAKE WORTH, FL 33460 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

OFFICERS AND DIRECTORS:

Title: PD
Name: CARTER, ROBERT R
Address: 715 NORTH B STREET
City-St-Zip: LAKE WORTH, FL 33460

Title: SD
Name: FOURNIER, ELISE
Address: 730 CRESTA CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33413

Title: VPD
Name: BERTISCH, ROBERT
Address: 423 FERN STREET SUITE 200
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D
Name: ROMMEL-ENRIGHT, KIMBERLY
Address: 7101 182ND RD N
City-St-Zip: JUPITER, FL 33458

Title: TD
Name: ENRIGHT, STEPHEN W
Address: 7101 182ND RD N
City-St-Zip: JUPITER, FL 33458

Title: D
Name: KENNY, KATHLEEN
Address: 3131 VILLAGE BLVD, #107
City-St-Zip: WEST PALM BEACH, FL 33409

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEPHEN ENRIGHT

TD

03/28/2011

Electronic Signature of Signing Officer or Director

Date