

**NO1000004961**

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 AUG -7 PM 2:05

*R.A. Chong*  
**C.COULLIETTE**

AUG 07 2009

**EXAMINER**

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

SUBJECT: Backlight Theater Group, Inc.  
Name of Corporation

DOCUMENT NUMBER: N/01000004961

**The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.**

**Please return all correspondence concerning this matter to the following:**

~~SETH MANN~~ PATRICK DEVLIN MANN  
Name of Contact Person

Firm/Company

~~112 Citrus Lane~~  
Address  
~~Ponte Vedra Beach~~  
FL  
32082  
City/State and Zip Code

devlin.director@mac.com  
E-mail address: (to be used for future annual report notification)

**For further information concerning this matter, please call:**

Christina League Mann at (904) 338 3090  
Name of Contact Person Area Code & Daytime Telephone Number

**Enclosed is a \$35.00 check made payable to the Department of State.**

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 30, 2009

PATRICK DEVLIN MANN,  
112 CITRUS LANE  
PONTE VEDRA BEACH, FL 32082

SUBJECT: BACKLIGHT THEATRE GROUP, INC.  
Ref. Number: N01000004961

We have received your document for BACKLIGHT THEATRE GROUP, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Per phone call to you I have the registered agent form you submitted with no information in the area for the new registered agent. If you are wanting to have someone else showing as the agent, you will need to resend the corrected form to indicate the changes needing to be made.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette  
Regulatory Specialist II

Letter Number: 109A00026222