

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000009471

FILED  
Feb 16, 2007  
Secretary of State

Entity Name: THE STAGE THEATRE, INC.

## Current Principal Place of Business:

5017 BELLFLOWER COURT, SUITE 104  
MELBOURNE, FL 32940

## New Principal Place of Business:

1494 PATRIOT DRIVE  
MELBOURNE, FL 32940

## Current Mailing Address:

5017 BELLFLOWER COURT, SUITE 104  
MELBOURNE, FL 32940

## New Mailing Address:

1494 PATRIOT DRIVE  
MELBOURNE, FL 32940

FEI Number: 43-1989182

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOWMAN, MARGARET E  
5017 BELLFLOWER COURT, SUITE 104  
MELBOURNE, FL 32940 US

## Name and Address of New Registered Agent:

BOWMAN, MARGARET E  
1494 PATRIOT DRIVE  
MELBOURNE, FL 32940 US

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: MARGARET E BOWMAN

02/16/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: BOWMAN, MARGARET E  
Address: 5017 BELLFLOWER COURT, SUITE 104  
City-St-Zip: MELBOURNE, FL 32940

Title: DVS ( ) Delete  
Name: MENTER, WILLIAM  
Address: 271 DICKINSON ST. SE  
City-St-Zip: PALM BAY, FL 32907

Title: DT ( ) Delete  
Name: BOWMAN, ROBERT M DR.  
Address: 5017 BELLFLOWER COURT, SUITE 104  
City-St-Zip: MELBOURNE, FL 32940

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: BOWMAN, MARGARET E  
Address: 1494 PATRIOT DRIVE  
City-St-Zip: MELBOURNE, FL 32940

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DT (X) Change ( ) Addition  
Name: BOWMAN, ROBERT M DR.  
Address: 1494 PATRIOT DRIVE  
City-St-Zip: MELBOURNE, FL 32940

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARGARET E BOWMAN

PRES

02/16/2007

Electronic Signature of Signing Officer or Director

Date