

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001857

FILED
Apr 12, 2006
Secretary of State

Entity Name: SOL CHILDREN THEATRE TROUPE INC.

Current Principal Place of Business:

3333 N. FEDERAL HIGHWAY
5
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

3333 N. FEDERAL HIGHWAY
5
BOCA RATON, FL 33431 FL

New Mailing Address:

FEI Number: 20-0853945 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GRANT, ROSALIE TD
916 S.E. 14TH COURT
DEERFIELD BEACH, FL 33441 US

Name and Address of New Registered Agent:

GRANT, ROSALIE D
916 S.E. 14TH COURT
DEERFIELD BEACH, FL 33441 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: ROSALIE GRANT

04/12/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: GRANT, ROSALIE
Address: 916 SE 14TH CT
City-St-Zip: DEERFIELD BCH, FL 33441

Title: PD () Delete
Name: GRANT, KEITH
Address: 916 SE 14THCOURT
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: VD () Delete
Name: HOLMES, JEFF
Address: 4278 NW 89TH AVE, APT 202
City-St-Zip: CORAL SPRINGS, FL 33065

Title: SD () Delete
Name: MCCABE, JEANNIE
Address: 3982 NW 3RD COURT
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GRANT, ROSALIE
Address: 916 SE 14TH CT
City-St-Zip: DEERFIELD BCH, FL 33441

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

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

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

Title: TD () Change (X) Addition
Name: ANN, KOHLER
Address: 1001 S.E. 7TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060 US

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: ROSALIE GRANT

D

04/12/2006

Electronic Signature of Signing Officer or Director

Date