

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000007952

FILED
Jan 18, 2009
Secretary of State

Entity Name: STAR CENTER CHILDREN'S THEATRE INC.

Current Principal Place of Business:

607 EAST UNIVERSITY AVENUE
GAINESVILLE, FL 32601 US

New Principal Place of Business:

3921 S.W. 13TH STREET
GAINESVILLE, FL 32608 US

Current Mailing Address:

607 EAST UNIVERSITY AVENUE
GAINESVILLE, FL 32601

New Mailing Address:

3921 S.W. 13TH STREET
GAINESVILLE, FL 32608 US

FEI Number: 01-0700516 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WILSON, RHONDA
1678 NW 19TH LANE
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

WILSON, RHONDA
3111 NE 11TH TERRACE
GAINESVILLE, FL 32609 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: RHONDA WILSON

01/18/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VELASQUES, CAROL
Address: NE 28TH AVENUE
City-St-Zip: GAINESVILLE, FL 32609

Title: S () Delete
Name: WILSON, RHONDA
Address: 1678 NW 19TH LANE
City-St-Zip: GAINESVILLE, FL 32605

Title: T () Delete
Name: JACKSON, THIRLIN
Address: 607 EAST UNIVERSITY AVENUE
City-St-Zip: GAINESVILLE, FL 32601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JACKSON, CAROL
Address: 1506 NE 28TH AVENUE
City-St-Zip: GAINESVILLE, FL 32609

Title: S (X) Change () Addition
Name: TYLER, JAMAILI
Address: 3921 S.W. 13TH STREET
City-St-Zip: GAINESVILLE, FL 32608

Title: T (X) Change () Addition
Name: VELASQUES, BRITTANY
Address: 3921 S.W. 13TH STREET
City-St-Zip: GAINESVILLE, FL 32608

I hereby certify that the information supplied with this filing does not qualify 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: CAROL JACKSON

P

01/18/2009

Electronic Signature of Signing Officer or Director

Date