

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003231

FILED
Apr 13, 2011
Secretary of State

Entity Name: THE STUDIO THEATRE OF WELLINGTON, INC.

Current Principal Place of Business:

1895 PRIMROSE LANE
WELLINGTON, FL 33414 86

New Principal Place of Business:

1895 PRIMROSE LANE
WELLINGTON, FL 33414 US

Current Mailing Address:

1895 PRIMROSE LANE
WELLINGTON, FL 33414 86

New Mailing Address:

1895 PRIMROSE LANE
WELLINGTON, FL 33414 US

FEI Number: 20-8779396

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SACKETT, PAULA
1895 PRIMROSE LANE
WELLINGTON, FL 334148662 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: SACKETT, PAULA
Address: 1895 PRIMROSE LANE
City-St-Zip: WELLINGTON, FL 33414 US

Title: D
Name: RESEN, JEANNE
Address: 6109 BAYWOOD LANE
City-St-Zip: GREENACRES, FL 33463 US

Title: D
Name: HARLESS, ROBERT
Address: 5550 SOUCHAK
City-St-Zip: W. PALM BCH, FL 33416

Title: D
Name: SACKETT, MICHAEL
Address: 1895 PRIMROSE LANE
City-St-Zip: WELLINGTON, FL 33414 US

Title: D
Name: SACKETT JESSEN, ELIZABETH
Address: 500C GRAND STREET, 10F
City-St-Zip: NEW YORK, NY 10001 US

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: PAULA SACKETT

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04/13/2011

Electronic Signature of Signing Officer or Director

Date