

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 13, 2008 8:00 am
Secretary of State

05-13-2008 90017 046 ****61.25

DOCUMENT # N07000005757

1. Entity Name

RIISING ACTION THEATRE, INC.



Principal Place of Business

**1831 NE 59 CT
FT LAUDERDALE FL 33308**

Mailing Address

**1831 NE 59 CT
FT LAUDERDALE FL 33308**



2. Principal Place of Business - No P.O. Box #

840 E. OAKLAND PARK BLVD

3. Mailing Address

Suite, Apt. #, etc.

Ste 106

Suite, Apt. #, etc.

City & State

OAKLAND PARK, FL

City & State

Zip

33334

Country

Broward

Zip

Country

4. FEI Number

30-0425052

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

1st MOORE

CR2E037 (10/07)

6. Name and Address of Current Registered Agent

**GOLDYN, DAVID
1831 NE 59 CT
FT LAUDERDALE FL 33308**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent, acceptable

DAVID GOLDYN

(NOTE: Registered Agent signature is required when reinstating)

DATE

4/24/08

**FILE NOW: FEE IS \$61.25
Due By May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to:
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **GOLDYN, DAVID**
CITY-ST-ZIP **1831 NE 59 CT
FT LAUDERDALE FL 33308**

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **CANGELOSI, MICHAEL**
CITY-ST-ZIP **1831 NE 59 CT
FT LAUDERDALE FL 33308**

TITLE ☐ Delete
NAME **S**
STREET ADDRESS **BENSMAN, HARRIET**
CITY-ST-ZIP **1959 LAVENDAR CIRCLE
WESTON FL 33327**

TITLE ☐ Delete
NAME **V**
STREET ADDRESS **KELLER, VICKI**
CITY-ST-ZIP **13611 OAKS CLUBHOUSE DRIVE APT 206
POMPANO BEACH FL 33069**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **FABIAN, PHIL**
CITY-ST-ZIP **113926 SUNRISE DRIVE
WHITTIER CA 90602**

TITLE ☒ Delete
NAME **D**
STREET ADDRESS **MURPHY, HUGH**
CITY-ST-ZIP **1950 HILLCREST DRIVE #505
HOLLYWOOD FL 33021**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael Cangelosi - Officer -

4/24/08 (954) 772-0042