

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007738

FILED  
Jan 07, 2009  
Secretary of State

Entity Name: AFASHEE THEATRE, INC.

**Current Principal Place of Business:**

701 WEST CHURCH STREET  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

315 E ROBINSON STREET  
SUITE 660  
ORLANDO, FL 32801

**New Mailing Address:**

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

**Name and Address of Current Registered Agent:**

ANDERSON, VERONICA ESQUIRE  
ANDERSON AND ASSOCIATES, P.A.  
805 S. KIRKMAN ROAD, SUITE 204  
ORLANDO, FL 32811 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: D ( ) Delete  
Name: LONG, INEZ  
Address: 315 EAST ROBINSON ST  
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Delete  
Name: ANDERSON, VERONICA  
Address: 805 S KIRKMAN ROAD, STE 204  
City-St-Zip: ORLANDO, FL 32811

Title: D ( ) Delete  
Name: MORGAN, LAVETTA  
Address: 315 E ROBINSON STREET SUITE 660  
City-St-Zip: ORLANDO, FL 32801

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: INEZ LONG

D

01/07/2009

Electronic Signature of Signing Officer or Director

Date