

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001786

FILED
Apr 17, 2009
Secretary of State

Entity Name: THE ATLANTIC THEATER AND PERFORMANCE COMPANIES, INC.

Current Principal Place of Business:

6743 W. INDIANTOWN ROAD
34
JUPITER, FL 33458 US

New Principal Place of Business:

Current Mailing Address:

6743 W. INDIANTOWN ROAD
34
JUPITER, FL 33458 US

New Mailing Address:

FEI Number: 26-2013385

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LICARI, FRANK
6156 WINDING LAKE DRIVE
JUPITER, FL 33458 US

Name and Address of New Registered Agent:

LICARI, FRANK
6743 W. INDIANTOWN RD. - #34
JUPITER, FL 33458 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: FRANK LICARI

04/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LICARI, FRANK
Address: 6743 W. INDIANTOWN ROAD
City-St-Zip: JUPITER, FL 33458 US

Title: DIR () Delete
Name: BARSTEIN, DIANE
Address: 106 NORTH RIVER DRIVE EAST
City-St-Zip: JUPITER, FL 33458 US

Title: VP () Delete
Name: SCHWARTZ, MICHAEL
Address: 114 WEST 47TH STREET
City-St-Zip: NEW YORK, NY 10036 US

Title: TRS () Delete
Name: SINGER, SCOTT C
Address: 366 N. BROADWAY - #6PHE
City-St-Zip: JERICO, NY 11753 US

Title: DIR () Delete
Name: STERN, RON
Address: 136 ECHO DRIVE
City-St-Zip: JUPITER, FL 33458 US

Title: DIR () Delete
Name: WNUKOWSKI, MARIANNE
Address: 17925 123RD TERRACE NORTH
City-St-Zip: JUPITER, FL 33478 US

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:

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

Title: () Change () Addition
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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: FRANK LICARI

PRES

04/17/2009

Electronic Signature of Signing Officer or Director

Date