2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 08, 2010
Secretary of State

DOCUMENT# N09000010939

Entity Name: THE LABORATORY THEATER OF FLORIDA, INC.

Current Principal Place of Business:

8720 CHATHAM ST.
FT. MYERS, FL 33907

New Principal Place of Business:

8720 CHATHAM ST.
FT. MYERS, FL 33907 US

Current Mailing Address:

8720 CHATHAM ST.
FT. MYERS, FL 33907

New Mailing Address:

8720 CHATHAM ST.
FT. MYERS, FL 33907 US

FEI Number: 27-0526903 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TROSSBACH, ANNETTE
8720 CHATHAM ST.
FT. MYERS, FL 33907 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: CD
Name: TROSSBACH, ANNETTE
Address: 8720 CHATHAM ST.
City-St-Zip: FT. MYERS, FL 33907

Title: VCD
Name: WIGGLESWORTH, LOUISE
Address: 2090 W. 1ST ST., #606
City-St-Zip: FT. MYERS, FL 33901

Title: SD
Name: PTASZEK, NICOLE
Address: 2730 2ND ST.
City-St-Zip: FT. MYERS, FL 33916

Title: TD
Name: MEYER, HUGH
Address: 8470 KINGBIRD LOOP, #1026
City-St-Zip: FT. MYERS, FL 33967

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: ANNETTE K TROSSBACH MS 08/08/2010

Electronic Signature of Signing Officer or Director Date