

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthland
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N14697

(9)

1. Corporation Name

MARTIN THEATRE PLAYERS, INC.



Principal Place of Business

Mailing Address

206 N MAIN ST
WILWOOD FL 34785
US

C/O MAC MERMELL
5875 S.W. 129TH TERRACE
MIAMI FL 33156

3. Date Incorporated or Qualified

05/01/1986

3a. Date of Last Report

03/15/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MERMELL, MAC
5875 S.W. 129TH TERRACE
MIAMI FL 33156

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME MERMELL, MAC
STREET ADDRESS 5875 S.W. 129TH TERRACE
CITY-ST-ZIP MIAMI FL

1.2 NAME ☒ DELETE

NAME TEAGLE, HELEN
STREET ADDRESS P.O. BOX 218, NA
CITY-ST-ZIP WILWOOD FL

1.3 NAME ☒ DELETE

NAME MERMELL, PEGGY
STREET ADDRESS 5875 S.W. 129TH TERR
CITY-ST-ZIP MIAMI FL

1.4 NAME ☒ DELETE

NAME MERMELL, RANDY
STREET ADDRESS 5875 S.W. 129TH TERRACE
CITY-ST-ZIP MIAMI FL

1.5 NAME ☐ DELETE

NAME
STREET ADDRESS

1.6 NAME ☐ DELETE

NAME
STREET ADDRESS

1.7 NAME ☐ DELETE

NAME
STREET ADDRESS

1.8 NAME ☐ DELETE

NAME
STREET ADDRESS

1.9 NAME ☐ DELETE

NAME
STREET ADDRESS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mac Mermell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/96

Date

305-6664500

Daytime Phone #

CR2E037 (12/95)

4-3-96