2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15054

Entity Name: ENZIAN THEATER, INC.

FILED Jul 13, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1300 S ORLANDO AVE MAITLAND, FL 327516415 US

Current Mailing Address: New Mailing Address:

1300 S ORLANDO AVE MAITLAND, FL 327516415 US

FEI Number: 59-2719581 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

TRISMEN, RICHARD F.

213 W. COMSTOCK, AVE.

WINTER PARK, FL 32789 US

TIEDTKE, SIGRID K.

1300 S ORLANDO AVE

MAITLAND, FL 32751 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: SIGRID TIEDTKE 07/13/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DTC () Delete Title: () Change () Addition Name: TIEDTKE, PHILIP Name:

 Name:
 TIEDTKE, PHILIP
 Name:

 Address:
 1760 GAINES WAY
 Address:

 City-St-Zip:
 WINTER PARK, FL 32789
 City-St-Zip:

 Title:
 DVC
 () Delete
 Title:
 DVCS
 (X) Change () Addition

 Name:
 TIEDTKE, PHILIP
 Name:
 SCHENCK, JEFFREY

 Address:
 1760 GAINES WAY
 Address:
 3964 SHADER ROAD

City-St-Zip: WINTER PARK, FL City-St-Zip: ORLANDO, FL 32808 US

 Title:
 DV
 () Delete
 Title:
 DP
 (X) Change () Addition

 Name:
 TRISHMEN, RICHARD F
 Name:
 TIEDTKE, SIGRID

 Address:
 213 W. COMSTOCK AVE
 Address:
 1300 S ORLANDO AVE

City-St-Zip: WINTER PARK, FL City-St-Zip: MAITLAND, FL 32751 US

 Title:
 DP (X) Delete
 Title:
 () Change () Addition

 Name:
 TIEDTKE, SIGRID
 Name:

 Address:
 1300 S ORLANDO AVE
 Address:

 City-St-Zip:
 MAITLAND, FL 32751
 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: SIGRID TIEDTKE DP 07/13/2007