

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32304

FILED  
Jan 06, 2005  
Secretary of State

Entity Name: FLORIDA THEATRICAL ASSOCIATION, INC.

**Current Principal Place of Business:**

201 S. ORANGE AVE., SUITE 100  
101  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

201 S. ORANGE AVE., SUITE 100  
101  
ORLANDO, FL 32801

**New Mailing Address:**

FEI Number: 31-1275462      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LEGLER, RONLAD G  
201 S. ORANGE AVE.  
STE. 101  
ORLANDO, FL 32801 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: PRES ( ) Delete  
Name: PITTMAN, ROBERT  
Address: 335 BELOIT AVE  
City-St-Zip: WINTER PARK,, FL 32789

Title: SEC ( ) Delete  
Name: GOODMAN, MICHAEL  
Address: 5310 NW 33RD AVE  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: TREA ( ) Delete  
Name: ALAR, JOHN  
Address: 1258 SE BREWSTER PLACE  
City-St-Zip: STUART, FL

Title: OFF ( ) Delete  
Name: CIRESI, JOE  
Address: 3401 N. I STREET  
City-St-Zip: PHILADELPHIA, PA 19134

Title: OFF ( ) Delete  
Name: CINNAMON, CHARLES  
Address: 927 LINCOLN ROAD, SUITE 218  
City-St-Zip: MIAMI BEACH, FL 33139

Title: OFF ( ) Delete  
Name: HOCH, GEORGE  
Address: 2506 ROCKY POINT DRIVE  
City-St-Zip: TAMPA, FL 33607

**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  
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 for the exemption stated in Section 119.07(3)(i), 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: ROBERT PITTMAN

PRES

01/06/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date