2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32304

FILED Jan 19, 2006 Secretary of State

Entity Name: FLORIDA THEATRICAL ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:			
201 S. ORANGE AVE., SUITE 100				301 E. PINE ST.			
101 ORLANDO, FL 32801				175 ORLANDO, FL 32801			
Current Mailing Address:				New Mailing Address:			
201 S. ORANGE AVE., SUITE 100				301 E. PINE ST.			
101 ORLANDO, FL 32801				175 ORLANDO, FL 32801			
FEI Number:	31-1275462	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable ()	Certificate of Status I	Desired ()
Name and	Address of C	urrent Registered Agent:	Name and Address of New Registered Agent:				
The above	ANGE AVE. , FL 32801 Us named entity s	S ubmits this statement for the p	ourpose o		EST ,FL 32801 L		gent, or both,
in the State							
SIGNATUR	RE: RONALD I	LEGLER c Signature of Registered Age	ont .			01/19/2006 Date	
OEEICEDS	AND DIRECT		OIIL	ADDITION	SICHANGES	TO OFFICERS AN	N DIDECTORS:
Title: Name: Address: City-St-Zip:		Delete ERT		Title: Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	SEC () GOODMAN, MIC 5310 NW 33RD FORT LAUDERE	AVE		Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	TREA () ALAR, JOHN 1258 SE BREWS STUART, FL	Delete STER PLACE		Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	OFF () CIRESI, JOE 3401 N. I STREE PHILADELPHIA,			Title: Name: Address: City-St-Zip:	BOLANOS, FR. 8500 SW 117 I	ROAD, SUITE 315	
Title: Name: Address: City-St-Zip:	OFF () CINNAMON, CHA 927 LINCOLN RO MIAMI BEACH, F	OAD, SUITE 218		Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	OFF () HOCH, GEORGE 2506 ROCKY PO TAMPA, FL 336	DINT DRIVE		Title: Name: Address: City-St-Zip:	() Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT PITTMAN PRES 01/19/2006