

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 09, 2007**  
**Secretary of State**

DOCUMENT# N43077

**Entity Name:** CINEMATIQUE OF DAYTONA, INC.**Current Principal Place of Business:**P. O. BOX 1105  
DAYTONA BEACH, FL 32115**New Principal Place of Business:****Current Mailing Address:**P. O. BOX 1105  
DAYTONA BEACH, FL 32115**New Mailing Address:****FEI Number:** 59-3056941**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MIDDENDORF, MARILYN  
1069 OAK FOREST CIR  
PORT ORANGE, FL 32129 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: T ( ) Delete  
Name: MIDDENDORF, MARILYN  
Address: 1069 OAK FOREST CIRCLEI  
City-St-Zip: PORT ORANGE, FL 321294173

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PRES ( ) Change (X) Addition  
Name: MASON-TEAGUE, STEPHANIE MRS  
Address: 170 ORCHARD LANE  
City-St-Zip: ORMOND BEACH, FL 32176

Title: VP ( ) Change (X) Addition  
Name: MALONEY-JOHNSON, KATHY MS  
Address: 210 SEMINOLE AVE  
City-St-Zip: ORMOND BEACH, FL 32176

Title: SEC. ( ) Change (X) Addition  
Name: SCHLIEPER, REINHOLD MR.  
Address: 23 SEAFARING PATH  
City-St-Zip: PALM COAST, FL 32164

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: STEHANIE MASON-TEAGUE

PRES

08/09/2007

Electronic Signature of Signing Officer or Director

Date