

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003074

FILED
May 01, 2008
Secretary of State

Entity Name: RITZ COMMUNITY THEATER PROJECTS, INC.

Current Principal Place of Business:

203 MAGNOLIA AVE
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

P O BOX 4321
SANFORD, FL 32772

New Mailing Address:

FEI Number: 59-3274090 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:

WINESBURGH, BEVERLY
978 DOUGLAS ROAD
SUITE 100
ALTAMONTE SPRINGS, FL 32714 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: P () Delete
Name: WEINSBURG, BEVERLY
Address: 978 DOUGLAS RD SUITE 100
City-St-Zip: ALTAMONTE SPRINGS, FL 32714\

Title: SD () Delete
Name: REECE, SARAH
Address: 846 BAYBREEZE LN
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: V () Delete
Name: GLAZIER, STEVE
Address: 555 WEST SR 434
City-St-Zip: LONGWOOD, FL 32750

Title: T () Delete
Name: REINECH, LISA
Address: 1401 W. SEMINOLE BLVD
City-St-Zip: SANFORD, FL 32771

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: T (X) Change () Addition
Name: SCOTT, DAVID
Address: 720 GLADWIN AVENUE
City-St-Zip: FERN PARK, FL 32730

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: JUNE POWELL

ED

05/01/2008

Electronic Signature of Signing Officer or Director

_____ Date