

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000001205

Entity Name: RTC ENTERTAINMENT, INC.

FILED
Oct 03, 2009
Secretary of State

Current Principal Place of Business:

225 N KENNEL RD
SANFORD, FL 32773

New Principal Place of Business:

Current Mailing Address:

PO BOX 609138
ORLANDO, FL 32860 US

New Mailing Address:

FEI Number: 59-3443654 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:

FLESHER, NANCY R
229 ALMA STREET
KISSIMMEE, FL 34741 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: NANCY FLESHER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MANNO, JOSEPH D
Address: 742 CLAY ST. SUITE C
City-St-Zip: WINTER PARK, FL 32789

Title: VSD () Delete
Name: DE ROSA, ANTHONY
Address: 742 CLAY ST. SUITE C
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: INELLO, ROBERT
Address: 187 BASS POINT RD
City-St-Zip: NAHANT, MA 01908

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MANNO, JOSEPH D
Address: PO BOX 609138
City-St-Zip: ORLANDO, FL 32860

Title: VSD (X) Change () Addition
Name: DE ROSA, ANTHONY
Address: PO BOX 609138
City-St-Zip: ORLANDO, FL 32860

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

Title: D () Change (X) Addition
Name: MURPHY, JOHN
Address: 225 N KENNEL RD
City-St-Zip: SANFORD, FL 32771

Title: D () Change (X) Addition
Name: BUSH, MARION
Address: PO BOX 609138
City-St-Zip: ORLANDO, FL 32860

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: ANTHONY DEROSA

VP

10/03/2009

Electronic Signature of Signing Officer or Director

Date