

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004387

FILED
Mar 05, 2009
Secretary of State

Entity Name: ACT ONE THEATRE PROJECT, INC.

Current Principal Place of Business:

7128 LAUDER PLACE
TAMPA, FL 33617

New Principal Place of Business:

Current Mailing Address:

7128 LAUDER PLACE
TAMPA, FL 33617

New Mailing Address:

FEI Number: 59-3460481

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRAPER, ANN MARIE
7128 LAUDER PL
WEST PALM BEACH, FL 33417 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: D () Delete
Name: TINDELL, DIANE
Address: 4302 SOUTHPARK DR
City-St-Zip: TAMPA, FL 33624 US

Title: D () Delete
Name: DRAPER, ANN MARIE MS.
Address: 7128 LAUDER PLACE
City-St-Zip: TAMPA, FL 33617 US

Title: O () Delete
Name: MARQUIT, HARRIET A MRS.
Address: 108 BACKCREEK DRIVE
City-St-Zip: HERTFORD, NC 27944 US

Title: D () Delete
Name: WYMAN, CAROLE
Address: 9719 HIDDEN OAKS CIR
City-St-Zip: TAMPA, FL 33612

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:

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: CAROLE WYMAN

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03/05/2009

Electronic Signature of Signing Officer or Director

Date