| NONPROFIT<br>CORPORATION<br>ANNUAL REPORT  |   | A DEPARTMENT<br>andra B. Morti<br>Secretary of Sta  | em   | ANI<br>FILE<br>98 MAY - 1  | .D<br>Am 7:49   |  |
|--|---|---|--|--|---|--|
| 1998 DIVISION OF CORPORATIONS DOCUMENT # N9700004759 (3) MOONLIGHT THEATRE AND FILM PRODUCTION INCORPORAT  |   |   |  | SECRETARY OF STATE<br>TALLAHASSEE, FLORIDA   |   |  |
| MOUNLIGHT I HEATKE AN<br>ED<br>Incloal Place of Business   | Mailing Address   |   |  |  |   |  |
| 31 SUTOR. SUITE A     1031 SUTOR. SUITE A       ALLAHASSEE FL 32311     TALLAHASSEE FL 32311   |   |   | 3. Date Incorporated or Qualified 08/21/1997   |  |   |  |
|  |   |   |  | 4. FEI Number  |   | oplied For<br>of Applicabl   |
| Principal Place of Business 2s. Mailing Address 26   |   |   | 5. Certificate of Status Desired   | \$8.75   | Additional<br>equired   |  |
| Suite, Apt. #, etc.  | Suite, Apt. #   | , etc.  |  | 6. Election Campaign Financing   | \$5.00  |  |
| City & State   | 27<br>City & State  |   | <u>.</u>   | 7. Is this nonprofit corporation a home  |   |  |
| Zip Country  | 26 Zip  | Cou   | ntry   | B. This corporation owes or has paid   |   | anoible  |
| 25   | 29<br>of Current Registered Agent   | 30  |  | Personal Property Tax due June 30<br>10. Name and Address of New Regis   | ), 🗌 Yes [  |  |
| TALLAHASSEE FL 32311   |   |   | 64 City  |  | as 7in  | Code   |
| 1. Pursuant to the provisions of Sections office or registered agent, or both, in  | s 617.0502 and 617.1508, Flori<br>the State of Florida. Such char   | da Statutes, the a  | ove-named cor  | poration submits this statement for the pur  | FL oose of changing it  | s registerer   |
| office or registered agent, or both, in agent. I am familiar with, and accept  | the State of Florida. Such char<br>the obligations of, Section 617  | ige was authorize<br>0503, Florida Sta  | pove-named cor<br>d by the corpora<br>utes.  | ation's board of directors. I hereby accept the second second second second second second second second second   | FL oose of changing it  | s registere  |
| office or registered agent, or both, in agent. I am femiliar with, and accept.<br>IGNATURE   | the State of Florida. Such char<br>the obligations of, Section 617  | ige was authorize<br>0503, Florida Sta  | pove-named cor<br>d by the corpora<br>utes.  | poration submits this statement for the pur<br>ation's board of directors. I hereby accept the<br>ited when reinstating)<br>ADDITIONS/CHANGES TO OFFICEF   | FL pose of changing it he appointment as  | s registered<br>registered   |
| IGNATURE<br>2.<br>Construct typed or printed name of re<br>Construct typed or printed name of re<br>Cons   | the State of Florida. Such char<br>the obligations of, Section 617<br>equilibrium and title if applicable.  | NOTE: Registere<br>(NOTE: Registere<br>13.<br>ELETE 1.1 Ti  | Dove-named cor<br>d by the corpora<br>utes.<br>d Agent signature requ  | ired when reinstating)   | FL pose of changing it he appointment as  | s registered<br>registered   |
| office or registered agent, or both, in<br>agent. I am familiar with, and accept<br>IGNATURE<br>Signature, typed or printed name of re<br>Signature, typed or printed name of re<br>Defice<br>ILE<br>CARTER, TENE<br>1031 SUTOR, SUITE A   | the state of Florida. Such char<br>the obligations of, Section 617<br>easily agent and title if applicable.<br>CERS AND DIRECTORS   | (NOTE: Registere<br>(NOTE: Registere<br>13.<br>ELETE<br>1.1 Ti<br>1.2 N<br>1.3 S  | Dove-named cor<br>d by the corpora<br>utes.<br>3 Agent signature required<br>ILE<br>IME<br>REET ADDRESS  | ired when reinstating)   | FL pose of changing it<br>he appointment as<br><u>1 46</u><br>BATE<br>RS AND DIRECTOR   | s registered<br>registered   |
| office or registered agent, or both, in<br>agent. I am familiar with, and accept<br>IGNATURE<br>Signature typed or printed name of re<br>2.<br>OFFIC<br>TLE<br>D<br>CARTER, TENE<br>1031 SUTOR, SUITE A<br>TALLAHASSEE FL 32:  | the state of Florida. Such char<br>the obligations of, Section 617<br>easily agent and title if applicable.<br>CERS AND DIRECTORS   | NOTE: Registere<br>(NOTE: Registere<br>13.<br>ELETE<br>1.1 Ti<br>1.2 N<br>1.3 S<br>1.4 C  | Dove-named cor<br>d by the corpora<br>utes.<br>3 Agent signature required<br>ILE<br>ME<br>REET ADDRESS<br>IY-ST-ZIP  | ation's board of <b>d</b> irectors. I hereby accept the second s | FL<br>pose of changing it<br>he appointment as<br>DATE<br>DATE<br>AS AND DIRECTOR<br>Change   | IS registered<br>registered<br>IS IN 12                                      |
| office or registered agent, or both, in<br>agent. I am familiar with, and accept<br>IGNATURE<br>Signature. typed or printed name of re<br>2.<br>OFFIC<br>TLE<br>TALLAHASSEE FL 32:<br>TY-ST-ZIP<br>TLE<br>WME<br>INCLER, IRWIN<br>INCLER, SUITE /<br>MILLER, IRWIN<br>INCLER, SUITE /  | the state of Florida. Such char<br>the obligations of, Section 617<br>eo side or egent and title if applicable.<br>CERS AND DIRECTORS   | NOTE: Registere<br>(NOTE: Registere<br>13.<br>ELETE 1.1 Tr<br>1.2 N<br>1.3 S<br>1.4 C<br>ELETE 2.1 TI<br>2.2 N  | Dove-named cor<br>d by the corpora<br>utes.<br>I Agent signature required<br>ILE<br>ILE<br>REET ADDRESS<br>IY-ST-ZIP<br>LE   | ADDITIONS/CHANGES TO OFFICER   | FL<br>pose of changing it<br>he appointment as<br>DATE<br>DATE<br>AS AND DIRECTOR<br>Change   | IS registered<br>registered<br>IS IN 12<br>Addition                          |
| OFFICE OF Tegistered agent, or both, in<br>agent. I am familiar with, and accept<br>Signature typed or printed name of re<br>2.<br>OFFIC<br>TLE<br>WARE<br>INTERET ADDRESS<br>TY-ST-ZIP<br>TALLAHASSEE FL 32:<br>TY-ST-ZIP<br>TALLAHASSEE FL 32:<br>TY-ST-ZIP  | the state of Florida. Such char<br>the obligations of, Section 617<br>eo side or egent and title if applicable.<br>CERS AND DIRECTORS   | 100 was authorize           0503, Florida Sta           (NOTE: Registere           13.           ELETE           1.1 Tr           1.2 N           1.3 S           1.4 C           ELETE           2.1 Tr           2.2 N           2.3 S           2.4 C  | Dove-named cor<br>d by the corpora<br>utes.<br>Agent signature requinance<br>ILE<br>IME<br>REET ADDRESS<br>IY-ST-ZIP<br>LE<br>REET ADDRESS<br>IY-ST-ZIP  | ADDITIONS/CHANGES TO OFFICER   | FL<br>pose of changing it<br>he appointment as<br>21/46<br>DATE<br>IS AND DIRECTOR<br>Change<br>Change<br>Change<br>Change<br>Change<br>Change<br>Change<br>Change<br>Change  | S IN 12<br>Additio   |
| OFFICE OF Tegistered agent, or both, in<br>agent. I am familiar with, and accept<br>Signature typed or printed name of re<br>2.<br>OFFIC<br>TLE<br>WARE<br>TREET ADDRESS<br>TY-ST-ZIP<br>TLE<br>WARE<br>TY-ST-ZIP<br>TLE<br>TALLAHASSEE FL 32:<br>TALLAHASSEE FL 32:<br>TY-ST-ZIP<br>TALLAHASSEE FL 32:<br>TALLAHASSEE FL 32:<br>TALLAHASSEE FL 32:<br>TY-ST-ZIP<br>TALLAHASSEE FL 32:<br>TALLAHASSEE FL 32:<br>TA | the state of Florida. Such char<br>the obligations of, Section 617<br>eo side or egent and title if applicable.<br>CERS AND DIRECTORS   | 196 was authorize<br>196 was authorize<br>197 197 197 197 197 197 197 197 197 197   | Dove-named cor<br>d by the corpora<br>utes.<br>Agent signature requires.<br>ILE<br>IME<br>REET ADDRESS<br>IY-ST-ZIP<br>LE<br>ME<br>REET ADDRESS<br>IY-ST-ZIP<br>LE   | ADDITIONS/CHANGES TO OFFICER   | FL<br>pose of changing it<br>he appointment as<br>DATE<br>IS AND DIRECTOR<br>Change<br>Change<br>Change   | S IN 12<br>Addition  |
| office or registered agent, or both, in agent, agent, arm familiar with, and accept.         IGNATURE         Signature typed or printed name of registered agent, and accept.         IGNATURE         Signature typed or printed name of registered agent, and accept.         IGNATURE         Signature typed or printed name of registered agent, or both, in accept.         IGNATURE         Signature typed or printed name of registered agent, or both, in accept.         IGNATURE         OFFIC         TE         D         MILLER, TENE         INTE         MILLER, IRWIN         IOST Colspan="2">IOST Colspan="2"         IOST Colspan="2"   | the state of Florida. Such char<br>the obligations of, Section 617<br>episterel agent and title if applicable.<br>CERS AND DIRECTORS  | 090 was authorize<br>0503, Florida Sta<br>(NOTE: Registere<br>13.<br>ELETE 1.1 Ti<br>1.2 N<br>1.3 S<br>1.4 C<br>ELETE 2.1 Ti<br>2.2 N<br>2.3 S<br>2.4 C<br>TE 3.1 Ti<br>3.2 N<br>3.3 S<br>3.4 C   | Dove-named cor<br>d by the corpora<br>utes.<br>I Agent signature requires.<br>ILE<br>ME<br>REET ADDRESS<br>IY- ST- ZIP<br>LE<br>ME<br>REET ADDRESS<br>IY- ST- ZIP<br>LE<br>ME<br>REET ADDRESS<br>IY- ST- ZIP | ADDITIONS/CHANGES TO OFFICER   | FL<br>pose of changing it<br>he appointment as<br>AND DIRECTOR<br>Change<br>Change<br>Change<br>Change  | IS IN 12<br>IS IN 12<br>Addition<br>101<br>1.25<br>Addition                  |
| office or registered agent, or both, in<br>agent. I am familiar with, and accept<br>IGNATURE<br>Signature typed or printed name of re<br>2. OFFIC<br>ILE<br>D<br>CARTER, TENE<br>1031 SUTOR, SUITE /<br>TALLAHASSEE FL 32:<br>TALLAHASSEE                | the state of Florida. Such char<br>the obligations of, Section 617<br>eo side or egent and title if applicable.<br>CERS AND DIRECTORS   | Ope was authorize           0503, Florida Sta           (NOTE: Registere           13.           ELETE           1.1 Tri           1.2 N           1.3 S           1.4 C           ELETE           2.1 Tri           2.2 N           2.3 S           2.4 C           TE           3.3 S           3.4 C           ELETE           4.1 Tri           4.2 M   | Agent signature requires.  | ADDITIONS/CHANGES TO OFFICER   | FL<br>pose of changing it<br>he appointment as<br>21/46<br>DATE<br>IS AND DIRECTOR<br>Change<br>Change<br>Change<br>Change<br>Change<br>Change<br>Change<br>Change<br>Change  | IS IN 12<br>IS IN 12<br>IS IN 12<br>IAddition<br>ID 1<br>I . 25<br>IAddition |
| office or registered agent, or both, in<br>agent. 1 am familiar with, and accept<br>IGNATURE<br>Signature typed or printed name of re<br>2. OFFIC<br>TLE D<br>WWE CARTER, TENE<br>1031 SUTOR, SUITE /<br>TALLAHASSEE FL 32:<br>TALLAHASSEE FL 32:<br>TLE D<br>MILLER, IRWIN<br>1031 SUTOR, SUITE /<br>TALLAHASSEE FL 32:<br>TLE D<br>MILLER, IRWIN<br>1031 SUTOR, SUITE /<br>TALLAHASSEE FL 32:<br>TLE D<br>MILLER, IRWIN<br>1031 SUTOR, SUITE /<br>TALLAHASSEE FL 32:<br>TLE D<br>PENN, HARLON<br>1112 S MAGNOLIA<br>TY-ST-ZIP<br>TLE MAGNOLIA<br>TALLAHASSEE FL<br>TLE WAE<br>IREET ADORESS<br>TY-ST-ZIP   | the state of Florida. Such char<br>the obligations of, Section 617<br>epileter agent and title if applicable.<br>CERS AND DIRECTORS   | Ope was authorize           0503, Florida Sta           (NOTE: Registere           13.           ELETE           1.1 Tri           1.2 N           1.3 S           1.4 C           ELETE           2.1 Tri           2.2 N           2.3 S           2.4 C           TE           3.3 S           3.4 C           ELETE           4.1 Tri           4.2 N           4.3 S'           4.4 C  | Agent signature requires.  | ADDITIONS/CHANGES TO OFFICER   | FL         pose of changing it         pose of changing it         he appointment as         DATE         SAND DIRECTOR         Is AND DIRECTOR         Change         Is Change         Is Change         Is Change         Change         Is Change         Is Change         Is Change         Is Change | s registere<br>registered<br>S IN 12<br>Additio                              |
| office or registered agent, or both, in<br>agent. I am familiar with, and accept<br>Signature: typed or printed name of re<br>2. OFFIC<br>TLE D<br>CARTER, TENE<br>1031 SUTOR, SUITE /<br>TALLAHASSEE FL 32:<br>TLE D<br>MILLER, IRWIN<br>1031 SUTOR, SUITE /<br>TALLAHASSEE FL 32:<br>TLE D<br>MILLER, IRWIN<br>1112 S MAGNOLIA<br>TALLAHASSEE FL<br>TLE<br>MME<br>IREET ADDRESS<br>TY-ST-2IP<br>TLE  | the state of Florida. Such char<br>the obligations of, Section 617<br>episterel agent and title if applicable.<br>CERS AND DIRECTORS  | Ope was authorize           0503, Florida Sta           (NOTE: Registere           13.           ELETE           1.1 Tr           1.2 N           1.3 S           1.4 C           ELETE           2.1 Tr           2.2 N           2.3 S           2.4 C           TE           3.1 Tr           3.2 N           3.3 S'           3.4 C           ELETE           4.1 Tr           4.2 N           4.3 S'           4.4 C           ELETE           5.1 TI  | Agent signature requires.  | ADDITIONS/CHANGES TO OFFICER   | FL<br>pose of changing it<br>he appointment as<br>AND DIRECTOR<br>Change<br>Change<br>Change<br>Change  | S IN 12<br>Additio   |
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| office or registered agent, or both, in agent, I am familiar with, and accept.         Signature typed or printed name of registered to  | the state of Florida. Such char<br>the obligations of, Section 617<br>eo side to egent and title if explicable.<br>CERS AND DIRECTORS<br>A<br>311<br>DI<br>A<br>311<br>DI<br>DI<br>DI<br>DI<br>DI<br>DI<br>DI<br>DI<br>DI<br>DI | Ope was authorize           0503, Florida Sta           (NOTE: Registere           13.           ELETE           1.1 Tr           1.2 N           1.3 S           1.4 C           ELETE           2.1 TI           2.2 N           2.3 S           2.4 C           TE           3.1 Tr           3.2 N           3.3 S           3.4 C           ELETE           4.1 TI           4.2 N           4.3 S'           4.4 C           5.1 TI           5.2 N.           5.3 S'           5.4 C   | Agent signature requires.  | ADDITIONS/CHANGES TO OFFICER   | FL         pose of changing it         pose of changing it         pare         DATE         SAND DIRECTOR         Change              | s registere<br>registered<br>S IN 12<br>Additio                              |
| OFFICE OF Tegistered agent, or both, in<br>agent. 1 am familiar with, and accept<br>Signature: typed or printed name of re<br>2. OFFIC<br>TLE D<br>CARTER, TENE<br>1031 SUTOR, SUITE /<br>TALLAHASSEE FL 32:<br>TLE D<br>MILLER, IRWIN<br>1031 SUTOR, SUITE /<br>TALLAHASSEE FL 32:<br>TLE D<br>MILLER, IRWIN<br>1112 S MAGNOLIA<br>TY-ST-2IP TALLAHASSEE FL<br>TLE<br>MIE<br>IREET ADDRESS<br>TY-ST-2IP<br>TLE<br>MIE  | the state of Florida. Such char<br>the obligations of, Section 617<br>eo side to egent and title if explicable.<br>CERS AND DIRECTORS<br>A<br>311<br>DI<br>A<br>311<br>DI<br>DI<br>DI<br>DI<br>DI<br>DI<br>DI<br>DI<br>DI<br>DI | Ope was authorize           0503, Florida Sta           (NOTE: Registere           13.           ELETE           1.1 Tr           1.2 N           1.3 S           1.4 C           ELETE           2.1 TI           2.2 N           2.3 S           2.4 C           TE           3.1 TC           3.2 N           3.3 S           3.4 C           ELETE           4.1 TI           4.2 N           4.3 S'           4.4 C           5.1 TI           5.2 N           5.3 SI           5.4 C           ELETE           6.1 TI           6.2 N | Agent eignature requires.  | ADDITIONS/CHANGES TO OFFICER   | FL         pose of changing it         pose of changing it         he appointment as         DATE         SAND DIRECTOR         Is AND DIRECTOR         Change         Is Change         Is Change         Is Change         Change         Is Change         Is Change         Is Change         Is Change | s registere<br>registered<br>S IN 12<br>Additio                              |