

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000387

FILED
Jan 17, 2007
Secretary of State

Entity Name: ACT II COMPLEX, INC.

Current Principal Place of Business:

50 NE 49TH ST
B
OCALA, FL 34479 US

New Principal Place of Business:

Current Mailing Address:

50 NE 49TH ST
B
OCALA, FL 34479 US

New Mailing Address:

FEI Number: 59-3489187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ODEN, PRICE
50-D NE 49TH STREET
OCALA, FL 34479 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: PD () Delete
Name: ODEN, PRICE
Address: 50-D NE 49TH STREET
City-St-Zip: OCALA, FL 34479

Title: S () Delete
Name: LANE, CAROL
Address: 1900 NW 44TH ST
City-St-Zip: OCALA, FL 34475

Title: T () Delete
Name: MCCALL, EUGENE
Address: 9805 SW 190TH TERRACE ROAD
City-St-Zip: DUNNELLON, FL 34432

Title: V () Delete
Name: LUND, DONNA M
Address: 7003 MARMICK PL
City-St-Zip: LAUREL, MD 20707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ED (X) Change () Addition
Name: ODEN, PRICE
Address: 50-D NE 49TH STREET
City-St-Zip: OCALA, FL 34479

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 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: PRICE ODEN

ED

01/17/2007

Electronic Signature of Signing Officer or Director

Date