

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000006352

FILED
Apr 23, 2003
Secretary of State

Entity Name: APPLAUSE COMMUNITY THEATER, INC.

Current Principal Place of Business:

2102 KAROLINA AVENUE
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

2102 KAROLINA AVENUE
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 59-3543441

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOLEY, GARY M
2102 KAROLINA AVE
WINTER PARK, FL 32789

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: COOLEY, GARY MERTON
Address: 2102 KAROLINA AVE.
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: COOLEY, VERNELLE K
Address: 2102 KAROLINA AVE.
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: GIBSON, JOHN THOMAS
Address: 5132 GOLDRDOD PLACE RD.
City-St-Zip: WINTER PARK, FL 327929252

Title: D () Delete
Name: COOLEY, WILLIAM A
Address: 2102 KAROLINA AVENUE
City-St-Zip: WINTER PARK, FL 32789

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 for the exemption stated in Section 119.07(3)(i), 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: GARY MERTON COOLEY

PD

04/23/2003

Electronic Signature of Signing Officer or Director

Date