

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001137

FILED  
Feb 27, 2006  
Secretary of State

**Entity Name:** THE JOBSITE THEATER, INC.

**Current Principal Place of Business:**

TBPAC - 1010 N. W. C. MACINNES PL  
TAMPA, FL 33601

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 7975  
TAMPA, FL 33673 US

**New Mailing Address:**

**FEI Number:** 59-3561564

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JENKINS, DAVID M  
3608 N. TAMPA ST  
TAMPA, FL 33603 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: CHAI ( ) Delete  
Name: JENKINS, DAVID M  
Address: 3608 N TAMPA ST  
City-St-Zip: TAMPA, FL 33603 US

Title: VICE ( ) Delete  
Name: CORLEY, AMY S  
Address: 610 3RD AVE S. #2  
City-St-Zip: ST PETE, FL 33701 US

Title: SEC ( ) Delete  
Name: STEVENSON, KATRINA  
Address: 8000 N. 13TH ST.  
City-St-Zip: TAMPA, FL 33604 US

Title: D ( ) Delete  
Name: PAONESSA, SHAWN A  
Address: 4301 N. CENTRAL AVE., APT. 1  
City-St-Zip: TAMPA, FL 336033914 US

Title: D ( ) Delete  
Name: HOLCOM, JAMES C  
Address: 14240 N. 42ND ST. #1304A  
City-St-Zip: TAMPA, FL 33613 US

Title: D ( ) Delete  
Name: SMALLHEER, BRIAN  
Address: 1217 VALLEY HILL DR.  
City-St-Zip: LAKE LAND, FL 33813 US

**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:

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: DAVID M JENKINS

CHAI

02/27/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date