

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001137

FILED
Mar 24, 2009
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:

TBPAC - 1010 N. W. C. MACINNES PL
TAMPA, FL 33602

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: PAONESSA, SHAWN A
Address: 4301 N. CENTRAL AVE. APT. 1
City-St-Zip: TAMPA, FL 336033914 US

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

Title: D () Delete
Name: POTENZA, PAUL J
Address: 2547 COUNTRYSIDE BLVD SUITE 4
City-St-Zip: CLEARWATER, FL 33761 US

Title: D () Delete
Name: CORLEY, AMI S
Address: 1407 E IDLEWILD AVE
City-St-Zip: TAMPA, FL 33604 US

Title: TREA () Delete
Name: SMALLHEER, BRIAN
Address: 1407 E IDLEWILD AVE
City-St-Zip: TAMPA, FL 33604 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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City-St-Zip:

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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: DAVID M. JENKINS

CHAI

03/24/2009

Electronic Signature of Signing Officer or Director

Date