

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006818

FILED  
Apr 10, 2005  
Secretary of State

**Entity Name:** MUSICTHEATER SUPPORT FUND, INC.

**Current Principal Place of Business:**

400 E. COLONIAL DRIVE  
SUITE 509  
ORLANDO, FL 328034509

**New Principal Place of Business:**

**Current Mailing Address:**

400 E. COLONIAL DRIVE  
SUITE 509  
ORLANDO, FL 328034509

**New Mailing Address:**

**FEI Number:** 59-3609648

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WOLPERT, PAIGE HAMMOND  
315 E. ROBINSON ST.  
SUITE 600  
ORLANDO, FL 32801 US

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

OWENS, RICHARD R  
400 EAST COLONIAL DRIVE  
SUITE 509  
ORLANDO, FL 32803 US

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: RICHARD R OWENS

04/10/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: OWENS, ROLANN B  
Address: 400 EAST COLONIAL DR. #509  
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete  
Name: OWENS, RICHARD R  
Address: 400 EAST COLONIAL DR. #509  
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete  
Name: FILITOWSKI, CONRAD MRS  
Address: 400 EAST COLONIAL DR #509  
City-St-Zip: ORLANDO, FL 32803

**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:

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: RICHARD R OWENS

D

04/10/2005

Electronic Signature of Signing Officer or Director

Date