

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90421 014 ***150.00

DOCUMENT # P01000099145

1. Entity Name
NOBLE THEATERS, INC.



Principal Place of Business
**5821 LAKE WORTH RD.
GREENACRES, FL 33463**

Mailing Address
**5821 LAKE WORTH RD.
GREENACRES, FL 33463**

40089663



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01172007 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number
65-1148431

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**SIDEL, PETER S
5821-C LAKE WORTH RD.
GREENACRES, FL 33463**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME HART, JOEL B
STREET ADDRESS 5821 LAKE WORTH RD.
CITY-ST-ZIP GREENACRES, FL 33463

TITLE STD ☐ Delete
NAME HART, NANCY C
STREET ADDRESS 5821 LAKE WORTH RD.
CITY-ST-ZIP GREENACRES, FL 33463

TITLE D ☐ Delete
NAME FORBERGER, PAUL
STREET ADDRESS 5821 LAKE WORTH RD.
CITY-ST-ZIP GREENACRES, FL 33463

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME Senior Vice President
STREET ADDRESS Forberger, Paul
CITY-ST-ZIP 5821 Lake Worth Rd.
GREENACRES, FL 33463

TITLE ☐ Change ☒ Addition
NAME Vice President
STREET ADDRESS Matthew P. Adams
CITY-ST-ZIP 5821 Lake Worth Rd.
GREENACRES, FL 33463

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Paul Forberger
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Paul Forberger, Senior VP

Date

04/20/07

Daytime Phone #

561-466-0070