

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000082303

1. Entity Name
CORINTHIAN STUDIO, INC.



Principal Place of Business
1245 W. FAIRBANKS AVENUE
SUITE 400
WINTER PARK, FL 32789

Mailing Address
1245 W. FAIRBANKS AVENUE
SUITE 400
WINTER PARK, FL 32789



03232005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3706102

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SLOCUM, RANDALL J
1245 W. FAIRBANKS AVENUE
SUITE 400
WINTER PARK, FL 32789

**DO NOT WRITE
IN THIS SPACE**

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000276717
03/25/05-80049-025 158.75

10. OFFICERS AND DIRECTORS

TITLE P
NAME SLOCUM, RANDALL J
STREET ADDRESS 1245 W. FAIRBANKS AVENUE, #400
CITY-ST-ZIP WINTER PARK, FL 32789

TITLE VP
NAME PLATTS, WILLIAM P
STREET ADDRESS 1245 W. FAIRBANKS AVENUE, #400
CITY-ST-ZIP WINTER PARK, FL 32789

TITLE S
NAME CASSIDY, TERESA
STREET ADDRESS P.O. BOX 1004
CITY-ST-ZIP WHITEFISH, MT 59937

TITLE T
NAME RIVES, BARBARA
STREET ADDRESS 8502 LAKELAND BLVD
CITY-ST-ZIP FORT PIERCE, FL 34951

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RANDALL J. SLOCUM, 3/23/05, (407) 645-3019