

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JUN -8 AM 9:40

DOCUMENT # P03817 (4)
1. Corporation Name
STORY THEATRE PRODUCTIONS, INC.

Principal Place of Business

**PARKER PLAYHOUSE
707 N.E. 8TH STREET
FT. LAUDERDALE FL 33304**

Mailing Address

**PARKER PLAYHOUSE
707 N.E. 8TH STREET
FT. LAUDERDALE FL 33304**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/25/1984	3a. Date of Last Report 06/06/1994
4. FEI Number 13-2666897	Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

**BRUDZINSKI, JULIA K.
707 N.E. 8TH STREET
FT. LAUDERDALE FL 33304**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83. City
84. City
85. Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	CINNAMON, CHARLES	1.2 NAME	
STREET ADDRESS	707 NE 8TH STREET	1.3 STREET ADDRESS	
CITY - ST - ZIP	FT. LAUDERDALE FL	1.4 CITY - ST - ZIP	
TITLE	STD	2.1 TITLE	☐ Change ☐ Addition
NAME	ARNOLD, JOEL	2.2 NAME	
STREET ADDRESS	707 NE 8TH STREET	2.3 STREET ADDRESS	
CITY - ST - ZIP	FT LAUDERDALE FL	2.4 CITY - ST - ZIP	
TITLE	VP	3.1 TITLE	☐ Change ☐ Addition
NAME	YOUNG, GEORGIANA	3.2 NAME	
STREET ADDRESS	707 NE 8TH STREET	3.3 STREET ADDRESS	
CITY - ST - ZIP	FT. LAUDERDALE FL	3.4 CITY - ST - ZIP	
TITLE	ED	4.1 TITLE	☐ Change ☐ Addition
NAME	BRUDZINSKI, JULIA	4.2 NAME	
STREET ADDRESS	707 NE 8TH STREET	4.3 STREET ADDRESS	
CITY - ST - ZIP	FT LAUDERDALE FL	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(4), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Julia K. Brudzinaki - Executive Director/Producer

May 30, 1995

(305) 763-8813

Date

Daytime Phone #