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FILED
May 20 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P03817 (4)

1. Corporation Name

STORY THEATRE PRODUCTIONS, INC.

Principal Place of Business

Mailing Address

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

PARKER PLAYHOUSE
707 N.E. 8TH STREET
FT. LAUDERDALE FL 33304-2749



3. Date Incorporated or Qualified
10/25/1984

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, 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
NAME CINNAMON, CHARLES
STREET ADDRESS 707 NE 8TH STREET
CITY-ST-ZIP FT. LAUDERDALE FL ☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE STD
NAME ARNOLD, JOEL
STREET ADDRESS 707 NE 8TH STREET
CITY-ST-ZIP FT. LAUDERDALE FL ☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME YOUNG, GEORGIANA
STREET ADDRESS 707 NE 8TH STREET
CITY-ST-ZIP FT. LAUDERDALE FL ☒ DELETE

3.1 TITLE VP
3.2 NAME KRAJSA, SUSAN A.
3.3 STREET ADDRESS 707 NE 8th Street
3.4 CITY-ST-ZIP FT. LAUDERDALE, FL ☒ Change ☐ Addition

TITLE ED
NAME BRUDZINSKI, JULIA
STREET ADDRESS 707 NE 8TH STREET
CITY-ST-ZIP FT. LAUDERDALE FL ☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do 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 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]
R. Brudzinski Executive Director/Producer

May 14, 1997 (954) 763-8813

Date

Daytime Phone # 0035526

CR2E037 (9/96)