FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 27 1998 8:00am

Secretary of State

Sandra B. Mort am

Secretary of State

DIVISION OF CORPORATIONS

1998 S

DOCU!	MENT # P0381	17 (4)		
STORY THEATRE PRODUCTIONS, INC.				
Principal Place of Business Mailing Address				T SABINGAL FIL DOLDO FILIAL SCIAL FIBOL (100) OLDIT DYBLY BYDIL BYDIL BYDIL BYDIL BYDIL BYDIL BYDIL
PARKER PLAYHOUSE PARKER PLAYHOUSE 707 N.E. 8TH STREET FT. LAUDERDALE FL 33304 FT. LAUDERDALE FL 3330				3. Date Incorporated or Qualified
			13304	10/25/1984
FI. CHOUCHURE	.C 7C 33304	TE CHODENDALE TE S	1000 1	4. FEI Number Applied For
4				13-2666897 Not Applicable
2. Principal Pi	ace of Business	26. Mailing Address		5. Certificate of Status Desired
Sulte, Apt	#, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be
22		27		Trust Fund Contribution Added to Fees
City & State	•	City & State		7. Is this nonprofit corporation a homeowners association?
23		28		☐ Yes ☐ No
Žip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	9. Name and Address of Curre	29 ent Registered Agent	30	Personal Property Tax due June 30. L. Yes L. No 10. Name and Address of New Registered Agent
			81 Name	
RDI IDZIK	ISKI JULIA K		00 0	Add (DO Do Alleria de Alei Anno Add)
BRUDZINSKI, JULIA K. 707 N.E. 8TH STREET				Address (P.O. Box Number is Not Acceptable)
FT. LAUDERDALE FL 33304			83	
			84 City	85 Zip Code
S Duramant	to the provisions of Continue 617.06	500 and 617 1500 Florida Pt	tatutes the above names	FL 00000
office or re	egistered agent, or both, in the Sta	te of Florida. Such change w	vas authorized by the cor	forporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
	m tamiliar with, and accept the obti	gations of, Section 617.0503	3, Florida Statutes.	
SIGNATURE _	Signature, typed or printed name of registered a	agent and fille if applicable.	(NOTE: Registered Agent signature	e required when reinstating) DATE
12.	OFFICERS A	IND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	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	T perese	1.4 CITY - ST - ZIP	
TITLE	STD ADMOLD 1051	☐ DELETE		Change Addition
NAME	ARNOLD, JOEL		2.2 NAME	
STREET ADDRESS	707 NE 8TH STREET FT LAUDERDALE FL		2.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	VP	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	Change Addition
NAME	KRAJSA, SUSAN A		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	DELETE		X Change ☐ Addition
NAME	Brudzinski, julia		4. 2 NAME	COLEY, JULIA
STREET ADDRESS	707 NE 8TH STREET		4.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL		4.4 CITY - ST - ZIP	
TITLE		☐ DELETE	•	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP	Change Addition
TITLE		☐ DECEIE		Change C Addition
NAME CTORET ADDRESS			6.2 NAME 6.3 STREET ADDRESS	
STREET ADDRESS			6.3 STREET ADDRESS	

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 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 of the corporation with an address.

MAY 14 1995 (201) NI 3-0613