

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03817

FILED
Jan 19, 2006
Secretary of State

Entity Name: STORY THEATRE PRODUCTIONS, INC.

Current Principal Place of Business:

201 S. ORANGE AVENUE
SUITE 101
ORLANDO, FL 32801

New Principal Place of Business:

301 E. PINE ST.
SUITE 175
ORLANDO, FL 32801

Current Mailing Address:

201 S. ORANGE AVENUE
SUITE 101
ORLANDO, FL 32801

New Mailing Address:

301 E. PINE ST.
SUITE 175
ORLANDO, FL 32801

FEI Number: 13-2666897

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEGLER, RONALD
201 S. ORANGE AVENUE
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

LEGLER, RONALD
301 E. PINE ST.
SUITE 175
ORLANDO, FL 32801 US

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.

SIGNATURE: RONALD LEGLER

01/19/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CINNAMON, CHARLES
Address: 707 NE 8TH STREET
City-St-Zip: FT. LAUDERDALE, FL

Title: STD () Delete
Name: ARNOLD, JOEL,
Address: 707 NE 8TH STREET
City-St-Zip: FT LAUDERDALE, FL

Title: VP () Delete
Name: KRAJSA, SUSAN A
Address: 707 NE 8TH STREET
City-St-Zip: FT. LAUDERDALE, FL

Title: STD () Delete
Name: VALENT, JULIA
Address: 707 NE 8TH STREET
City-St-Zip: FT LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIA VALENT

STD

01/19/2006

Electronic Signature of Signing Officer or Director

Date