

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12689

Entity Name: PLITT THEATRES, INC.

FILED
Mar 07, 2006
Secretary of State

Current Principal Place of Business:

C/O LOEWS CINIPLEX-US
711 5TH AVENUE, 10TH FL
NEW YORK, NY 10022

New Principal Place of Business:

920 MAIN STREET
KANSAS CITY, MO 64105

Current Mailing Address:

C/O LOEWS CINIPLEX-US
711 5TH AVENUE, 10TH FL
NEW YORK, NY 10022 US

New Mailing Address:

920 MAIN STREET
KANSAS CITY, MO 64105 US

FEI Number: 36-2794628

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REID, TRAVIS
Address: 711 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10022 OC

Title: VP () Delete
Name: BERNDT, BRYAN
Address: 711 5TH AVE.
City-St-Zip: NEW YORK, NY 10022 OC

Title: S () Delete
Name: POLITI, MICHAEL
Address: 711 5TH AVENUE
City-St-Zip: NEW YORK, NY 10022 OC

Title: T () Delete
Name: WALKER, JOHN J
Address: 711 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10022 OC

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BROWN, PETER C
Address: 920 MAIN STREET
City-St-Zip: KANSAS CITY, MO 64105 US

Title: CFO (X) Change () Addition
Name: RAMSEY, CRAIG R
Address: 920 MAIN STREET
City-St-Zip: KANSAS CITY, MO 64105 US

Title: S (X) Change () Addition
Name: CONNOR, KEVIN M
Address: 920 MAIN STREET
City-St-Zip: KANSAS CITY, MO 64105 US

Title: T (X) Change () Addition
Name: CRAWFORD, TERRY W
Address: 920 MAIN STREET
City-St-Zip: KANSAS CITY, MO 64105 US

Title: VP () Change (X) Addition
Name: SCHEMENAUER, KELLY W
Address: 920 MAIN STREET
City-St-Zip: KANSAS CITY, MO 64015 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KELLY W SCHEMENAUER

VP

03/07/2006

Electronic Signature of Signing Officer or Director

_____ Date