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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P96000066087 (3)**

1. Corporation Name
CAROUSEL'S JUPITER THEATRE, INC.

Principal Place of Business	Mailing Address
1001 E. INDIANTOWN ROAD JUPITER FL 33477	1001 E. INDIANTOWN ROAD JUPITER FL 33477-5110

3. Date Incorporated or Qualified: 08/08/1996
3a. Date of Last Report:

2. Principal Place of Business
21:
Suite, Apt. #, etc.
22:
City & State
23:
Zip 24: Country 25:

2a. Mailing Address
26: 1275 E. WATERLOO RD
Suite, Apt. #, etc.
27: P.O. Box 7530
City & State
28: AKRON, OH
Zip 29: 44306 Country 30: USA

4. FEI Number: 65-0687441 ☐ 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

BERROCAL, CARLOS J ESQ.
1070 E. INDIANTOWN ROAD
SUITE 310
JUPITER FL 33477

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	P	☒ Change ☐ Addition
NAME	GRIFFITH, PRESCOTT F		1.2 NAME	GRIFFITH, PRESCOTT F.	
STREET ADDRESS	12758 E. WATERLOO ROAD		1.3 STREET ADDRESS	1275 E. WATERLOO RD.	
CITY-ST-ZIP	AKRON OH 44306		1.4 CITY-ST-ZIP	AKRON, OH 44306	
TITLE		☐ DELETE	2.1 TITLE	P/S	☐ Change ☒ Addition
NAME			2.2 NAME	GRIFFITH, PRESCOTT F.	
STREET ADDRESS			2.3 STREET ADDRESS	1275 E. WATERLOO RD.	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	AKRON, OH 44306	
TITLE		☐ DELETE	3.1 TITLE	V/T	☐ Change ☒ Addition
NAME			3.2 NAME	RESNIK, MARC A.	
STREET ADDRESS			3.3 STREET ADDRESS	1275 E. WATERLOO RD	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	AKRON, OH 44306	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: PRESCOTT F. GRIFFITH