

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N32304

**FILED**  
**Jan 08, 2016**  
**Secretary of State**  
**CC1545440221**

**Entity Name:** FLORIDA THEATRICAL ASSOCIATION, INC.

**Current Principal Place of Business:**

100 S EOLA DRIVE  
200  
ORLANDO, FL 32801

**Current Mailing Address:**

100 S EOLA DRIVE  
200  
ORLANDO, FL 32801

**FEI Number:** 31-1275462

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WATCHORN, LARRY  
100 S EOLA DRIVE  
STE. 200  
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:** LARRY WATCHORN

01/08/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAI  
Name SIMMS, BRYANT HMR  
Address 250 ESSEX LANE  
City-State-Zip: W. PALM BEACH FL 33405

Title V CH  
Name VALENT, JULIA MS  
Address 1122 HICKORY WAY  
City-State-Zip: WESTON FL 33327

Title TREA  
Name PALMER, MARY DR.  
Address 11410 SWIFT WATER CIRCLE  
City-State-Zip: ORLANDO FL 32817

Title SECY  
Name GOODMAN, MICHAEL MR  
Address 701 W. CYPRESS CREEK RD ST 204  
City-State-Zip: FT LAUDERDALE FL 33309

Title EXECUTIVE DIRECTOR  
Name WATCHORN, LARRY  
Address 100 S EOLA DRIVE  
200  
City-State-Zip: ORLANDO FL 32801

*I hereby 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 all other like empowered.*

**SIGNATURE:** LARRY WATCHORN

**EXECUTIVE DIRECTOR**

01/08/2016

Electronic Signature of Signing Officer/Director Detail

Date