## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F02000003375

FILED Jan 03, 2005 Secretary of State

Entity Name: TECO THEATRICAL PRODUCTIONS, INC.

**Current Principal Place of Business: New Principal Place of Business:** 731 SO. R.L. THORNTON FREEWAY DALLAS, TX 75203 **Current Mailing Address: New Mailing Address:** 731 SO. R. L. THORNTON FREEWAY DALLAS, TX 75203 US FEI Number: 58-2069891 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DERAE, RICKY 19380 COLLINS AVENUE APT. 515 SUNNY ISLES, FL 33160 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PRES () Delete () Change () Addition WASH, AL L Name: Name: 801 COBBLESTONE COURT Address: Address: City-St-Zip: CEDAR HILL, TX 75104 City-St-Zip: Title: SEC ( ) Delete Title: () Change () Addition MONDY, KEVIN Name: Name: Address: 2040 EMPIRE CENTRAL Address: City-St-Zip: DALLAS, TX 75235 City-St-Zip: Title: TREA () Delete Title: () Change () Addition WHITAKER, C. W. Name: Name: 6652 AUTUMN WOODS Address: Address: City-St-Zip: DALLAS, TX 75232 City-St-Zip: Title: CHAI ( ) Delete Title: () Change () Addition Name: MURRELL, ANITA Name: 5520 CHIMNEY ROCK DR Address: Address: City-St-Zip: FT WORTH, TX 76112 City-St-Zip: Title: () Delete Title: () Change () Addition BEYAH, KENYA Name: Name: 3708 WILLOW TREE CIRCLE Address: Address: City-St-Zip: DOUGLASVILLE, GA 30135 City-St-Zip: Title: () Delete Title: () Change () Addition THOMAS, GAYLORD Name: Name: Address: 7071 BONNIE VIEW Address: DALLAS, TX 75214 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TERESA COLEMAN WASH ED 01/03/2005