## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED **DOCUMENT # N20393** Mar 31, 2000 8:00 am 1. Entity Name **Secretary of State** LEMON BAY PLAYHOUSE, INC., THE ENGLEWOOD COMMUNI 03-31-2000 90086 045 \*\*\*\*61.25 Principal Place of Business Mailing Address 96 W DEARBORN STREET 96 W DEARBORN ENGLEWOOD FL 34223-3235 ENGLEWOOD FL 34223 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 59-2803975 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HYATT, PAUL 150 ENGLEWOOD RD Zip Code City FI ENGLEWOOD FL 34223 8. 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. FRATE HER SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing → FILE NOW: Make Check Payable to \$5.00 May Be **FEE IS \$61.25** Trust Fund Contribution. Added to Fees **Department of State** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PD Change Addition TITLE Delete TITLE BOBBI MCMILLIN RODVIK. BARBARA NAME NAME 119 FAIRWAY RD STREET ADDRESS STREET ADDRESS PO BOX 1077 CITY-ST-7IP ROTONDA WEST, FL 33947 CITY-ST-ZIP **ENGLEWOOD FL 34295** Addition TITLE D ☐ Delete TITLE ☐ Change PAUL MANKE NAME HANSON, BILL NAME ISH ENGLEWOOD RD STREET ADDRESS STREET ADDRESS 5184 CONNER TER CITY-ST-ZIP CITY-ST-ZIP ENGLEWOOD, FL CAPE HAZEL FL TITLE SD ☐ Delete TITLE SD ☐ Change \_ Addition BILL HAMSON NAME BARNETT, DOREEN NAME 5184 CONNERTER STREET ADDRESS STREET ADDRESS 643 MICHIGAN AVE CAPE HAZE, FL CITY-ST-ZIP CITY-ST-ZIP ENGLEWOOD FL VD Delete TITLE ← Change ☐ Addition TITLE RICHARD CORN NAME MCMILLIN, BOBBI NAME 2055 FORKED CREEK DR STREET ADDRESS STREET ADORESS 119 FAIRWAY RD CITY-ST-ZIP CITY-ST-ZIP ENGLEWOOD, EL ROTONDA WEST FL TITLE ☐ Change Addition ☐ Delete TITLE DOREEN BARKETT HOLLENSBE, WAYNE NAME NAME STREET ADDRESS STREET ADDRESS 643 KICHIBAN AUE. 3539 E CYTON CT CITY-ST-ZIP CITY-ST-ZIP WARM MINERAL SPRINGS FL ENGLEWOOD, FL ☐ Change ☐ Addition TITLE TITLE D CORN ☐ Delete WAYNE HOLLENSBE NAME NAME CORIN, RICHARD 3539 ECYTON CT STREET ADDRESS STREET ADDRESS 2055 FORKED CREEK DR WARM MINERALSPRINGS CITY-ST-ZIP CITY-ST-7IP ENGLEWOOD FL 12. I 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 report or supplemental 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

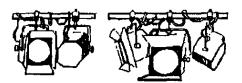
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Caytires Phone #

changed, or on an attachment with an address, with all other like enpowered.

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 in Block 10 or Block 11 if





## Lemon Bay Playhouse

96 W. Dearborn St Englewood, FL 34223

Telephone (941) 475-6756

E Mail: LBP34223@aol.com

additional director added:

MARK WEISER 18595 GOODMAN CIRCLE PORT CHARLOTTE, +1 33948