

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20393

FILED
Jan 06, 2010
Secretary of State

Entity Name: LEMON BAY PLAYHOUSE, INC., THE ENGLEWOOD COMMUNITY THEATRE

Current Principal Place of Business:

96 W DEARBORN STREET
ENGLEWOOD, FL 34223 US

New Principal Place of Business:

Current Mailing Address:

96 W DEARBORN ST
ENGLEWOOD, FL 34223 US

New Mailing Address:

FEI Number: 59-2803975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANUSHEK, JAMES E
150 N OXFORD DR
ENGLEWOOD, FL 34223 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

OFFICERS AND DIRECTORS:

Title: D
Name: HANUSHEK, JAMES E
Address: 150 N. OXFORD DR
City-St-Zip: ENGLEWOOD, FL 34223

Title: VD
Name: ROLLO, PHYLLIS
Address: 800 OXFORD DR S
City-St-Zip: ENGLEWOOD, FL 34223

Title: TD
Name: DUBOWIK, JOHN
Address: 2805 N BEACH RD # B
City-St-Zip: NORTH PORT, FL 34286

Title: D
Name: KYPER, HOWARD
Address: 281 PARK FOREST BLVD
City-St-Zip: ENGLEWOOD, FL 34223

Title: D
Name: COLMAR, JOYCE
Address: 724 A MANASOTA KEY RD
City-St-Zip: ENGLEWOOD, FL 34223

Title: D
Name: RAGAN, SHERIE
Address: 930 BAYSHORE DR
City-St-Zip: ENGLEWOOD, FL 34223

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: JAMES E. HANUSHEK

D

01/06/2010

Electronic Signature of Signing Officer or Director

Date