

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20393

FILED
Jan 10, 2012
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 STREET
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:

LA SALLE, ROBERT M
10162 TOPSAIL AVE.
ENGLEWOOD, FL 34224 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: PD
Name: STUMP, STEVE
Address: 2810 N. BEACH RD
City-St-Zip: ENGLEWOOD, FL 34223

Title: VD
Name: TREMO, PATRICK
Address: 2835A N. BEACH RD.
City-St-Zip: ENGLEWOOD, FL 34223

Title: TD
Name: LA SALLE, ROBERT M
Address: 10162 TOPSAIL AVE.
City-St-Zip: ENGLEWOOD, FL 34224

Title: SD
Name: BARNES, MARION
Address: 1070 E. LAUREL RD.UNIT 407
City-St-Zip: NOKOMIS, FL 34275

Title: D
Name: BARNES, MARION
Address: 1070 LAUREL RD. E STE 407
City-St-Zip: NOKOMIS, FL 34275

Title: D
Name: BARNETT, DOREEN
Address: 1755 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: ROBERT M. LA SALLE

TD

01/10/2012

Electronic Signature of Signing Officer or Director

Date