

AMENDED

# **NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 701923

1. Entity Name

THE COCONUT GROVE PLAYHOUSE, INC.

FILED

02 NOV 26 PM 2: 26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

3500 MAIN HWY

3. Mailing Address

3500 MAIN HWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

COCONUT GROVE, FLORIDA

City & State

COCONUT GROVE, FLORIDA

4. FEI Number

59-6152238

Applied For

Not Applicable

Zip  
33133

Country  
USA

Zip  
33133

Country  
USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name CorpDirect Agents, Inc.

Street Address (P.O. Box Number is Not Acceptable)

103 N. Meridian Street, Lower Level

City Tallahassee

FL

Zip Code  
32301

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

200009225812  
11/26/02--01061--012 \*\*61.25

FEE IS \$61.25  
Initial or Amended UBR

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D / P / C  
Vincent F. Post, Jr.  
3500 Main Hwy, Coconut Grove, FL 33133

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D / V / VC  
Peggy Hollander  
3500 Main Hwy, Coconut Grove, FL 33133

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D / V / VC  
Shelly Spivack  
3500 Main Hwy, Coconut Grove, FL 33133

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D / T  
Mitchell Less  
3500 Main Hwy, Coconut Grove, FL 33133

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D / S  
Michael Chavies  
3500 Main Hwy, Coconut Grove, FL 33133

TITLE  
NAME  
STREET ADDRESS  
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

11-20-2002

Date

Daytime Phone #

PEGGY M. HOLLANDER

CR2E037B (12/01)