

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 701923

FILED  
Apr 21, 2009  
Secretary of State

**Entity Name:** THE COCONUT GROVE PLAYHOUSE, INC.

**Current Principal Place of Business:**

3500 MAIN HWY  
COCONUT GROVE, FL 33133 US

**New Principal Place of Business:**

**Current Mailing Address:**

3500 MAIN HIGHWAY  
COCONUT GROVE, FL 33133 US

**New Mailing Address:**

**FEI Number:** 59-6152238

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SPIVACK, RACHELLE  
834 JOHNSON STREET  
HOLLYWOOD, FL 33019 US

**Name and Address of New Registered Agent:**

MIAMI CORPORATE SYSTEMS, LLC  
283 CATALONIA AVENUE  
SUITE 200  
CORAL GABLES, FL 33134 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: SALOMON B. ESQUENAZI, MANAGER

04/21/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: C ( ) Delete  
Name: SPIVACK, RACHELLE  
Address: 3500 MAIN HWY  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: VC ( ) Delete  
Name: MARQUEZ, EMILY  
Address: 3500 MAIN HWY  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: T ( ) Delete  
Name: POST, VINCENT F JR  
Address: 3500 MAIN HWY  
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: S ( ) Delete  
Name: GONZALEZ-LEVY, SANDRA  
Address: 3500 MAIN HWY  
City-St-Zip: COCONUT GROVE, FL 33133 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: VINCE POST

T

04/21/2009

Electronic Signature of Signing Officer or Director

Date