

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711125

Entity Name: CULTURAL PARK THEATRE COMPANY, INC.

Current Principal Place of Business:

CULTURAL PARK THEATRE
528 CULTURAL PARK BLVD
CAPE CORAL, FL 33990

Current Mailing Address:

PO BOX 150022
CAPE CORAL, FL 33915 US

FEI Number: 59-1155302

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORAN, MICHAEL D
528 CULTURAL PARK BLVD
CAPE CORAL, FL 33990 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MAGLIONE-CHENAULT, LISA
Address 3532 SW 17TH PL
City-State-Zip: CAPE CORAL FL 33914

Title 1ST VICE PRESIDENT
Name WENGERTER, CHRISTI
Address 118 SE 8TH PL
City-State-Zip: CAPE CORAL FL 33990

Title D
Name MORAN, MICHAEL
Address 12645 5TH STREET
City-State-Zip: FT MYERS FL 33905

Title 2ND VICE PRESIDENT
Name MASELLI, RAY
Address 602 SE 27TH ST
City-State-Zip: CAPE CORAL FL 33904

Title 3RD VICE PRESIDENT
Name CULLITON, ADAM
Address 5752 FLAMINGO DRIVE
City-State-Zip: CAPE CORAL FL 33904

Title TREASURER
Name KOC, JUNE
Address 1990 ROSEATE LANE
City-State-Zip: SANIBEL FL 33957

Title RECORDING SECRETARY
Name DAVIES, SUZANNE
Address 505 SE 30TH TERRACE
City-State-Zip: CAPE CORAL FL 33904

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: MICHAEL MORAN

EXECUTIVE DIRECTOR

04/22/2021

Electronic Signature of Signing Officer/Director Detail

Date