

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719982

Entity Name: THE BARN THEATRE, INC.**Current Principal Place of Business:**2400 S.E. OCEAN BLVD.
STUART, FL 34996**Current Mailing Address:**P.O. BOX 1894
STUART, FL 34995 US**FEI Number:** 23-7425604**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JENNINGS, ROBERT L
306 S.E. DETROIT AVENUE
STUART, FL 34994 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	TREASURER	Title	SECRETARY
Name	BECKSTEAD, FRANCINE	Name	WEAVER, KATHLEEN
Address	4665 SE CANDY LN	Address	4537 ARTESA WAY SOUTH
City-State-Zip:	STUART FL 34997	City-State-Zip:	PALM BEACH GARDENS FL 33418
Title	MARKETING VICE PRESIDENT	Title	VOLUNTEER VICE PRESIDENT
Name	MCGEADY, DENNIS	Name	HARTMAN, TERRI
Address	1950 NE INDIAN RIVER DRIVE #203	Address	874 SW LIGHTHOUSE DRIVE
City-State-Zip:	JENSEN BEACH FL 34957	City-State-Zip:	PALM CITY FL 34990
Title	THEATRICAL VICE PRESIDENT	Title	PRESIDENT
Name	MAZZELLA, JEANETTE	Name	MAZZZELLA, CHRIS
Address	4621 SW GLEN ABBY CT	Address	4261 SW GLEN ABBY CT
City-State-Zip:	PALM CITY FL 34990	City-State-Zip:	PALM CITY FL 34990
Title	DIRECTOR	Title	DIRECTOR
Name	JENNINGS, ROBERT	Name	MOLINARI, MARCIA
Address	306 SE DETROIT AVE	Address	7380 SE FLAMINGO WAY
City-State-Zip:	STUART FL 39994	City-State-Zip:	HOBE SOUND FL 33455

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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: FRANCINE BECKSTEAD**TREASURER****08/14/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	ADMINISTRATIVE VICE PRESIDENT
Name	TOBIN, PATRICIA
Address	4269 SE ROBERTSON RD
City-State-Zip:	PORT ST LUCIE FL 34997