2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724317

Entity Name: FRIENDS OF THEATRE, INC. THE

FILED Feb 10, 2024 Secretary of State 2394044030CC

Current Principal Place of Business:

MEMORIAL DRIVE, UNIVERSITY OF MIAMI P. O. BOX 248273 RING THEATRE CORAL GABLES, FL 33124

Current Mailing Address:

3252 RIVIERA DR. % THOR BRUCE CORAL GABLES, FL 33134 US

FEI Number: 23-7197647 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRUCE, THOR W PHD 3252 RIVIERA DR % THOR BRUCE CORAL GABLES, FL 33134 US

OONAL GABLLO, I'L 33134 00

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: THOR W. BRUCE 02/10/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PD Title VD

NameBRUCE, THOR WNameNEWPORT, CAROLAddress3252 RIVIERA DRAddress10775 N BAYSHORE DR

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: MIAMI FL 33165

Title SD Title SD

Name SARAFOGLU, MARGARET Name VITAL, PEGGY

Address 6201 SW 118 ST Address 343 MAJORCA AVE

City-State-Zip: MIAMI FL 33156 City-State-Zip: CORAL GABLES FL 33134

Title DL Title DL

NameKING, CAMILLENameLANGSTON, HENRYAddress11140 SW 71 AVEAddress9350 S DIXIE HWY
11TH FLOOR

City-State-Zip: PINECREST FL 33156 City-State-Zip: MIAMI FL 33156

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: THOR W. BRUCE PRESIDENT 02/10/2024