

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724317

Entity Name: FRIENDS OF THEATRE, INC. THE

Current Principal Place of Business:

MEMORIAL DRIVE, UNIVERSITY OF MIAMI
CORAL GABLES, FL 33124

Current Mailing Address:

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

FEI Number: 23-7197647

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LANTAFF, KENT
THEATRE ARTS DEPT
1231 DICKINSON DR
CORAL GABLES, FL 33124 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 TD
Name PALLEY, SHELDON B
Address 8365 S W 91ST STREET
City-State-Zip: MIAMI FL 33156

Title PD
Name MCKINNEY, NAOMI
Address 3618 SW 57 AVE
City-State-Zip: MIAMI FL 33155

Title PD
Name CLARKE, PATRICIA
Address 1001 SUNSET DRIVE
City-State-Zip: MIAMI FL 33134

Title VPD
Name ESTAVER, JOANNE
Address 9221 S W 69TH COURT
City-State-Zip: PINECREST FL 33156

Title VPD
Name WALDMAN, MARSHALL
Address 6312 S W 93RD AVENUE
City-State-Zip: MIAMI FL 33173

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: SHELDON B PALLEY

TREASURER

01/18/2017

Electronic Signature of Signing Officer/Director Detail

Date