

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 724317

**FILED  
Mar 07, 2019  
Secretary of State  
2912076034CC**

**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	Title	PD
Name	PALLEY, SHELDON B	Name	MCKINNEY, NAOMI
Address	8365 S W 91ST STREET	Address	3618 SW 57 AVE
City-State-Zip:	MIAMI FL 33156	City-State-Zip:	MIAMI FL 33155
Title	PD	Title	VPD
Name	CLARKE, PATRICIA	Name	ESTAVAR, JOANNE
Address	1001 SUNSET DRIVE	Address	9221 S W 69TH COURT
City-State-Zip:	MIAMI FL 33134	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**

**03/07/2019**

Electronic Signature of Signing Officer/Director Detail

Date