

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740338

Entity Name: THE AMERICAN STAGE COMPANY, INC.**Current Principal Place of Business:**244 2ND AVENUE NORTH
SUITE 320
ST PETERSBURG, FL 33701**Current Mailing Address:**244 2ND AVENUE NORTH
SUITE 320
ST PETERSBURG, FL 33701**FEI Number:** 59-1777189**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**GULARTE, STEPHANIE
244 2ND AVENUE NORTH
ST PETERSBURG, FL 33701 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:** STEPHANIE GULARTE

04/06/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CHAIR
Name	CONIGLIARO, MATTHEW
Address	244 2ND AVENUE NORTH
City-State-Zip:	SAINT PETERSBURG FL 33701

Title	CO-CHAIR
Name	RUDNICKI, ROBERT
Address	244 2ND AVENUE NORTH
City-State-Zip:	ST PETERSBURG FL 33701

Title	TREASURER
Name	ALFORD, MICHAEL
Address	244 2ND AVENUE NORTH SUITE 320
City-State-Zip:	ST PETERSBURG FL 33701

Title	SECRETARY
Name	BIEVER, ANGELA
Address	244 2ND AVENUE NORTH
City-State-Zip:	SAINT PETERSBURG FL 33701

Title	PRODUCING ARTISTIC DIRECTOR
Name	GULARTE, STEPHANIE
Address	244 2ND AVENUE NORTH
City-State-Zip:	ST PETERSBURG FL 33701

Title	MANAGING DIRECTOR
Name	SLABY, KENNETH
Address	244 3RD STREET N SUITE-320
City-State-Zip:	ST PETERSBURG FL 33701

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: STEPHANIE GULARTEPRODUCING ARTISTIC
DIRECTOR

04/06/2015

Electronic Signature of Signing Officer/Director Detail

Date