

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005572

Entity Name: PLAYWRIGHTS' ROUND TABLE, INC.

Current Principal Place of Business:

4696 MIDDLEBROOK ROAD
J
ORLANDO, FL 32811

Current Mailing Address:

4696 MIDDLEBROOK ROAD
J
ORLANDO, FL 32811 US

FEI Number: 59-3733179

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DENT, CHARLES R
4696 MIDDLEBROOK ROAD
J
ORLANDO, FL 32811 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 P
Name DENT, CHARLES R
Address 4696 MIDDLEBROOK ROAD #J
City-State-Zip: ORLANDO FL 32811

Title VP
Name PERGANDE, AL
Address 1314 CHICHESTER ST.
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR
Name DICKENS, BETHANY
Address 11563 AMIDSHIP LANE
UNIT 8307
City-State-Zip: WINDERMERE FL 34786

Title SECRETARY
Name WHITE, SUSAN
Address 228 LIVE OAK LANE
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title DIRECTOR
Name TRASK, BILL
Address 4500 FONTANA ST
City-State-Zip: ORLANDO FL 32807

Title TREASURER
Name NORRIS, GARY
Address 1830 S. LEHIGH DRIVE
City-State-Zip: DELTONA FL 32725

Title NON-OFFICER DIRECTOR
Name WHEELER, ROCHELLE
Address 524 LEGACY PARK DRIVE
City-State-Zip: CASSELBERRY FL 32707

Title NON-OFFICER DIRECTOR
Name BABCOCK, AARON
Address 811 GREGORY LANE
City-State-Zip: ALTAMONTE SPRINGS FL 32701

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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: CHARLES DENT

PRESIDENT

02/05/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WOLF, AYAL
Address 421 LANCERS DRIVE
City-State-Zip: WINTER SPRINGS FL 32708