2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2019
Secretary of State
3714656005CC

DOCUMENT# N04000005092

Entity Name: GULFSHORE PLAYHOUSE, INC.

Current Principal Place of Business:

755 8TH AVENUE SOUTH
NAPLES, FL 34102

Current Mailing Address:

1010 5TH AVENUE SOUTH
SUITE 205
NAPLES, FL 34102 US

FEI Number: 90-0178566

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCOY, ALYSON
1010 5TH AVENUE SOUTH
SUITE 205
NAPLES, FL 34102 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: ALYSON MCCOY 04/24/2019

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR, CHAIRMAN
Name	HARDEN, ROBERT
Address	8787 BAY COLONY DRIVE
City-State-Zip:	NAPLES FL 34108

Title	D
Name	KORN, JASON
Address	7165 MILL RUN CIRCLE
City-State-Zip:	NAPLES FL 34109

Title	D
Name	NORTMAN, JACK
Address	4400 GULF SHORE BOULEVARD N
City-State-Zip:	NAPLES FL 34103

Title	DIRECTOR
Name	DROBIS, DAVID
Address	685 JAMESTOWN LANE
City-State-Zip:	NAPLES FL 34108

Title	DIRECTOR, PRESIDENT, CEO
Name	COURY, KRISTEN
Address	6150 CYPRESS HOLLOW WAY
City-State-Zip:	NAPLES FL 34109

Title	D
Name	PASTER, GAIL
Address	7041 VERDE WAY
City-State-Zip:	NAPLES FL 34108

Title	D
Name	SEVIGNY, TENNILLE
Address	1629 SERENITY CIRCLE
City-State-Zip:	NAPLES FL 34110

Title	DIRECTOR
Name	BAKER, PATTY
Address	4101 GULF SHORE BLVD N PH # 5
City-State-Zip:	NAPLES FL 34103

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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: ALYSON MCCOY GENERAL MANAGER, SECRETARY 04/24/2019

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR, VC
Name	AKIN, STEVE
Address	318 NEAPOLITAN WAY
City-State-Zip:	NAPLES FL 34103

Title	DIRECTOR
Name	PANZICA, TONY
Address	7984 GRAND BAY DR.
City-State-Zip:	NAPLES FL 34108

Title	DIRECTOR
Name	MORAN, SANDI
Address	340 WEST STREET
City-State-Zip:	NAPLES FL 34108

Title	TREASURER
Name	MARKUS, JOEL
Address	1010 5TH AVENUE SOUTH SUITE 205
City-State-Zip:	NAPLES FL 34102

Title	DIRECTOR
Name	GHOUSSAINI, NIZAR
Address	7331 TILDEN LANE
City-State-Zip:	NAPLES FL 34108

Title	DIRECTOR
Name	HOUSE, JENNIFER
Address	50 6TH AVE. NORTH
City-State-Zip:	NAPLES FL 34102

Title	DIRECTOR
Name	MCCULLOCH, DONALD JR.
Address	232 POINT SALERNO
City-State-Zip:	NAPLES FL 34108

Title	SECRETARY
Name	MCCOY, ALYSON
Address	1010 5TH AVENUE SOUTH SUITE 205
City-State-Zip:	NAPLES FL 34102