

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19077

FILED
Mar 15, 2016
Secretary of State
CC1875196374

Entity Name: COMMUNITY THEATRE OF MIAMI LAKES, INC.

Current Principal Place of Business:

6766 MAIN STREET
MIAMI LAKES, FL 33014

Current Mailing Address:

6766 MAIN STREET
MIAMI LAKES, FL 33014 US

FEI Number: 65-0010115

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LYZNIAK, CLARA M
16019 NW 82 PLACE
MIAMI LAKES, FL 33016 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 PRESIDENT
Name LYZNIAK, CLARA MARIA
Address 16019 NW 82ND PLACE
City-State-Zip: MIAMI LAKES FL 33016

Title SECRETARY
Name GONZALEZ, MELISSA
Address 9561 FOUNTAINEBLEAU BLVD.
 APT. 508
City-State-Zip: MIAMI FL 33172

Title VP
Name COPPEL, ROBERT
Address 14252 NW 83RD COURT
City-State-Zip: MIAMI LAKES FL 33016

Title DIRECTOR
Name JAMES, CHARLES
Address 18220 SW 6TH STREET
City-State-Zip: PEMBROKE PINES FL 33029

Title DIRECTOR
Name FERNANDEZ, PATTY
Address 16751 NE 9TH AVENUE
 APT.301
City-State-Zip: NORTH MIAMI BEACH FL 33162

Title DIRECTOR
Name OLIVERA, JOHN
Address 9995 SW 35TH TERRACE
City-State-Zip: MIAMI FL 33165

Title TREASURER
Name LYZNIAK, DENNIS JOSEPH
Address 16019 NW 82ND PLACE
City-State-Zip: MIAMI LAKES FL 33016

Title DIRECTOR
Name NIEVES, DANIEL
Address 1325 SW 93RD PLACE
City-State-Zip: MIAMI FL 33174

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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: DENNIS J LYZNIAK

TREASURER

03/15/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CASTILLO, CINDY
Address 3761 EAST 3RD AVENUE
City-State-Zip: HIALEAH FL 33013

Title DIRECTOR
Name CHIDSEY, LARRY
Address 9313 NW 2ND COURT
City-State-Zip: MIAMI SHORES FL 33150

Title DIRECTOR
Name KARAN, DUYSEVI
Address 19510 WEST OAKMONT DRIVE
City-State-Zip: MIAMI FL 33015