

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19813

Entity Name: FLORIDA STATE THESPIAN SOCIETY, INC.**Current Principal Place of Business:**1400 HIGHWAY 41 N
#849
INVERNESS, FL 34451**Current Mailing Address:**1400 HIGHWAY 41 N
#849
INVERNESS, FL 34451 US**FEI Number:** 59-2892076**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NEANDER, KRISTEN M
1400 HIGHWAY 41 N #849
INVERNESS, FL 34451 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, DIRECTOR, CEO,
CHAIRMAN
Name NEANDER, KRISTEN M
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

Title DIRECTOR
Name GERDEMAN, SUSAN
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

Title DIRECTOR
Name TAMILLO, JILLIANNE
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

Title DIRECTOR
Name MENDEZ-NAPOLEONI, ALEXIS
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

Title TREASURER
Name PARIS, SEAN
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

Title DIRECTOR
Name BLANKS, JASON
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

Title DIRECTOR
Name ENGLE, KRISTEN
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

Title DIRECTOR
Name BUNNELL, JENNIFER
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

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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: KRISTEN M. NEANDER

CHAPTER DIRECTOR

04/14/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SESSIONS, LORI
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

Title DIRECTOR
Name MARSHALL, GAIL
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

Title DIRECTOR
Name ROHLEDER, MARTIN
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

Title DIRECTOR
Name FISH, TALIA
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

Title DIRECTOR
Name WHITMAN, TARA
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

Title DIRECTOR
Name GRAFF, GARY
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

Title DIRECTOR
Name BARNHILL, FRANCINE
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

Title SECRETARY
Name LAUDIA, JEN
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

Title DIRECTOR
Name FORBUS-MURRAY, SAVANNAH
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451

Title DIRECTOR
Name SHANAHAN, BEVERLEY
Address 1400 HIGHWAY 41 N
#849
City-State-Zip: INVERNESS FL 34451