## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20393

COMMUNITY THEATRE

Entity Name: LEMON BAY PLAYHOUSE, INC., THE ENGLEWOOD

**Current Principal Place of Business:** 

96 W DEARBORN STREET ENGLEWOOD, FL 34223

**Current Mailing Address:** 

96 W DEARBORN STREET ENGLEWOOD, FL 34223 US

FEI Number: 59-2803975 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LA SALLE, ROBERT M 10162 TOPSAIL AVE. ENGLEWOOD, FL 34224 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

**FILED** Feb 09, 2017

**Secretary of State** 

CC5482949197

Officer/Director Detail:

Title VD Title D.

Name TYLER, CHARLES Name MANNS, JAMES Address 3219 24TH PKWY. Address 160 BROADWAY

**UNIT 204** 

City-State-Zip: SARASOTA FL 34235 City-State-Zip: ENGLEWOOD FL 34223

S/T, D Title Title

Name FOX, KIM STRAUSS, MICHELL Name

Address 359 ARDENWOOD DR. Address 3219 24TH PKWY City-State-Zip: ENGLEWOOD FL 34223 City-State-Zip: SARASOTA FL 34235

Title D

Title **PRESIDENT** Name SCIARELLO, JAMES P Name BUPP, RON

374 EDEN DR. Address Address 15528 ALDAMA DR.

ENGLEWOOD FL 34223 City-State-Zip: PORT CHARLOTTE FL 33981 City-State-Zip:

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: ROBERT M. LA SALLE

**EXECUTIVE DIRECTOR** 

02/09/2017