

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20393

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

FILED
Jan 25, 2016
Secretary of State
CC1448868123

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

Officer/Director Detail :

Title PD/TD
Name LA SALLE, ROBERT
Address 10162 TOPSAIL AVE.
City-State-Zip: ENGLEWOOD FL 34224

Title VD
Name TYLER, CHARLES
Address PO BOX 1878
City-State-Zip: BOCA GRANDE FL 33921

Title D.
Name NEITZEL, MICHELLE
Address PO BOX 790
City-State-Zip: VENICE FL 34284

Title SD
Name FOX, KIM
Address 359 ARDENWOOD DR.
City-State-Zip: ENGLEWOOD FL 34223

Title D
Name STRAUSS, MICHELL
Address 3219 24TH PKWY
City-State-Zip: SARASOTA FL 34235

Title D
Name SCIARELLO, JAMES P
Address 374 EDEN DR.
City-State-Zip: ENGLEWOOD FL 34223

Title D
Name BUPP, RON
Address 15528 ALDAMA DR.
City-State-Zip: PROT CHARLOTTE FL 33981

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

PRESIDENT

01/25/2016

Electronic Signature of Signing Officer/Director Detail

Date