## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003838

Entity Name: ATLANTIC BEACH EXPERIMENTAL THEATRE, INC.

FILED Feb 05, 2013 Secretary of State CC9713825812

**Current Principal Place of Business:** 

716 OCEAN BLVD.

ATLANTIC BEACH, FL 32233

## **Current Mailing Address:**

1015 ATLANTIC BLVD.,#175 ATLANTIC BEACH, FL 32233

FEI Number: 59-3212409 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

GLEIT, ALAN 10 TENTH STREET UNIT 32 ATLANTIC BEACH, FL 32233 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:

TitleTREASURERTitlePRESIDENTNameGLEIT, ALANNameGLAZENER, BOBAddress10 TENTH STREET, UNIT 32Address1213 ZEPHYR WAY S

City-State-Zip: ATLANTIC BEACH FL 32233 City-State-Zip: JACKSONVILLE BEACH FL 32250

Title DIRECTOR Title VP

Name HENNESSEY, MARGARET Name BULL, JANE

Address 2547 DAUPHINE CT E Address 404 SANIBEL COURT

City-State-Zip: PONTE VEDRA FL 32082 City-State-Zip: NEPTUNE BEACH FL 32266

Title DIRECTOR Title SECRETARY

Name HULETT, JUDY Name FORTUNE, JENNIFER

Address 1208 8TH STREET N Address 84 NICOLE LANE

City-State-Zip: JACKSONVILLE BEACH FL 32250 City-State-Zip: ATLANTIC BEACH FL 32233

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: ALAN GLEIT TREASURER 02/05/2013