2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003838

Entity Name: ATLANTIC BEACH EXPERIMENTAL THEATRE, INC.

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 :

Title	TREASURER	Title	PRESIDENT
Name	GLEIT, ALAN	Name	HULETT, JUDY
Address	10 TENTH STREET, UNIT 32	Address	1100 SEAGATE AVE. 125
City-State-Zip:	ATLANTIC BEACH FL 32233	City-State-Zip:	NEPTUNE BEACH FL 32266
Title	SECRETARY	Title	VP
Name	TILLOTSON, AMY	Name	MACKO, ASHLEY
Address	1414 BIG TREE ROAD	Address	1100 SEAGATE AVE. #60
City-State-Zip:	NEPTUNE BEACH FL 32266	City-State-Zip:	NEPTUNE BEACH FL 32266
Title	DIRECTOR	Title	DIRECTOR
Name	JACKSON, RHODIE	Name	BARNARD, JACK
Address	1140 KENDALL TOWN BLVD 5210	Address	11661 OXFORD CREST LANE
City-State-Zip:	JACKSONVILLE FL 32225	City-State-Zip:	JACKSONVILLE FL 32258
Title	DIRECTOR		
Name	JOHNSON, BRIAN		
Address	1805 SEA OATS DRIVE		
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   02/07/2017

Electronic Signature of Signing Officer/Director Detail   Date