2018 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	DIRECTOR
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	PRESIDENT	Title	DIRECTOR
Name	MACKO, ASHLEY	Name	JACKSON, RHODIE
Address	1100 SEAGATE AVE. #60	Address	1140 KENDALL TOWN BLVD 5210
City-State-Zip:	NEPTUNE BEACH FL 32266	City-State-Zip:	JACKSONVILLE FL 32225
Title	DIRECTOR	Title	VP
Name	BARNARD, JACK	Name	JOHNSON, BRIAN
Address	11661 OXFORD CREST LANE	Address	1805 SEA OATS DRIVE
City-State-Zip:	JACKSONVILLE FL 32258	City-State-Zip:	ATLANTIC BEACH FL 32233
Title	SECRETARY		
Name	DARNELL, BETSY		
Address	2233 LAUGHING GULL CIRCLE		
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   02/12/2018

Electronic Signature of Signing Officer/Director Detail   Date