2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001137

Entity Name: THE JOBSITE THEATER, INC.

Current Principal Place of Business: STRAZ CENTER - 1010 N. W. C. MACINNES PL

TAMPA FL 33602

Current Mailing Address:

PO BOX 7975

TAMPA FL 33673 US

FEI Number: 59-3561564 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JENKINS, DAVID M DR. 3608 N. TAMPA ST TAMPA FL 33603 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: DAVID M. JENKINS 01/26/2016

Electronic Signature of Registered Agent

Date

FILED Jan 26, 2016

Secretary of State

CC7649220232

Officer/Director Detail:

Title OTHER Title OTHER

Name JENKINS, DAVID M DR. Name POTENZA, PAUL J

Address 3608 N TAMPA ST Address 2547 COUNTRYSIDE BLVD SUITE 4

City-State-Zip: TAMPA FL 33603 City-State-Zip: CLEARWATER FL 33761

Title CHAIRMAN Title OTHER

Name FENDRICK, ELIZABETH Name CASEY, BRAD

Address 809 E. FLORA ST. Address 1010 NWC MACINNES PL

City-State-Zip: TAMPA FL 33604 City-State-Zip: TAMPA FL 33602

Title OTHER Title SECRETARY

Name GOBIOFF, NEIL Name GOETZ, KARI

Address 2516 W. SIMMS BLVD Address 5608 N. SUWANNEE AVE.

City-State-Zip: TAMPA FL 33609 City-State-Zip: TAMPA FL 33604

Title OTHER Title VC

Name MADALENA, CHRIS Name PERKINS, GREGG

Address 1911 N. 13TH ST. W200 Address 2830 W. FOUNTAIN BLVD.

City-State-Zip: TAMPA FL 33605 City-State-Zip: TAMPA FL 33609

Continues on page 2

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: DAVID M. JENKINS

PRODUCING ARTISTIC DIRECTOR

01/26/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title TREASURER Title OTHER

Name GETTO, ELISSA Name MCLAUGHLIN, BRENDEN

Address 3421 HYDE PARK DR. Address 405 E. ROSS ST.

City-State-Zip: CLEARWATER FL 33761 City-State-Zip: TAMPA FL 33603