## 2020 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 01/20/2020

Electronic Signature of Registered Agent

Officer/Director Detail:

Title OTHER Title TREASURER

Name JENKINS, DAVID M DR. Name CASEY, BRAD

Address 3608 N TAMPA ST Address 1010 NWC MACINNES PL

City-State-Zip: TAMPA FL 33603 City-State-Zip: TAMPA FL 33602

Title CHAIR Title VICE CHAIR

NameCLEGG, STEPHANIENameLOVELL, BRENDAAddress307 W. HENRY AVE.Address5115 STRATTON AVE.

City-State-Zip: TAMPA FL 33604 City-State-Zip: TAMPA FL 33624

Title OTHER Title OTHER

Name BURKE, TIM Name RUDOWSKY, WILLI

Address 5914 N. TAMPA ST. Address 1 BEACH DR. SE 2705

City-State-Zip: TAMPA FL 33604

City-State-Zip: TAMPA FL 33604 City-State-Zip: ST. PETERSBURG FL 33701

Title DEVELOPMENT CHAIR

Name EASON, CAITLIN
Address PO BOX 7975

City-State-Zip: TAMPA FL 33673

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 01/20/2020
DIRECTIR

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 20, 2020

**Secretary of State** 

5977484188CC

Date