

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 725431

FILED
Oct 03, 2014
Secretary of State

Entity Name: ST LUCIE COMMUNITY THEATRE INC

Current Principal Place of Business:

700 W WEATHERBEE RD
FORT PIERCE, FL 34982 US

New Principal Place of Business:

Current Mailing Address:

700 W WEATHERBEE RD
FORT PIERCE, FL 34982 US

New Mailing Address:

FEI Number: 23-7378281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRINKERHOFF, MARK
1366 36TH AVE
VERO BEACH, FL 32960 US

Name and Address of New Registered Agent:

ACHIN, DAWN
2544 SW CALENDER ST
PORT ST LUCIE, FL 34953 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: DAWN M ACHIN

10/03/2014

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP
Name: KRANTS, JOHN
Address: 368 SE GLENWOOD DRIVE
City-St-Zip: PORT ST LUCIE, FL 34984

Title: RS/D
Name: PARKER-EARLL, LESLIE
Address: 2138 SE SHELTER DRIVE
City-St-Zip: PORT ST LUCIE, FL 34952

Title: P
Name: ACHIN, DAWN
Address: 2544 SW CALENDER ST
City-St-Zip: PORT ST LUCIE, FL 34953

Title: CS/D
Name: AMARU, DONNA
Address: 132 NW BROKEN OAK TRAIL
City-St-Zip: JENSEN BEACH, FL 34957

Title: D
Name: DIONNE, STEVEN
Address: 6709 WOODS ISLAND CIR #108
City-St-Zip: PORT ST LUCIE, FL 34952

Title: T
Name: KNIGHT, ROSEMARY
Address: 3975 NW DEER OAK DRIVE
City-St-Zip: JENSEN BEACH, FL 34957

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: DAWN M ACHIN

P

10/03/2014

Electronic Signature of Signing Officer or Director

Date