2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 27, 2012
Secretary of State

DOCUMENT# N20393

Entity Name: LEMON BAY PLAYHOUSE, INC., THE ENGLEWOOD COMMUNITY THEATRE

Current Principal Place of Business:

96 W DEARBORN STREET
ENGLEWOOD, FL 34223 US

New Principal Place of Business:

Current Mailing Address:

96 W DEARBORN STREET
ENGLEWOOD, FL 34223 US

New Mailing Address:

FEI Number: 59-2803975 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LA SALLE, ROBERT M
10162 TOPSAIL AVE.
ENGLEWOOD, FL 34224 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: LA SALLE, ROBERT
Address: 10162 TOPSAIL AVE.
City-St-Zip: ENGLEWOOD, FL 34224

Title: VD
Name: TYLER, CHARLES
Address: PO BOX 1878
City-St-Zip: BOCA GRANDE, FL 33921

Title: TD
Name: STUMP, STEVE M
Address: 2810 N. BEACH RD.
City-St-Zip: ENGLEWOOD, FL 34223

Title: SD
Name: BARNETT, DOREEN
Address: 2451 BELLE RD.
City-St-Zip: ENGLEWOOD, FL 34223

Title: D
Name: ARDREY, MARY LOU
Address: 2115 W. DOLPHIN DR.
City-St-Zip: ENGLEWOOD, FL 34223

Title: D
Name: FOX, KIM
Address: 359 ARDENWOOD DR.
City-St-Zip: ENGLEWOOD, FL 34223

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: ROBERT M. LA SALLE PD 08/27/2012

Electronic Signature of Signing Officer or Director Date