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SECRETARY OF STA



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	The Beach Theatre (Community Foundation	, Inc.	
DOCUMENT NUMBER:	N21000011726			
The enclosed Articles of Am		mitted for filing.		
Please return all corresponde	ence concerning this mat	er to the following:		
Thomas A. Brodersen , F3	9.			
	•	(Name of Contact Pers	son)	
Anderson & Brodersen, P.A				
-		(Firm/ Company)		
350 Corey Ave.				
		(Address)		
St. Pete Beach, FL 33706				
		(City/ State and Zip Co	ode)	
tom@propertylawgroup.com	n			
F	-mail address: (to be use	d for future annual repo	rt notification	<u>n)</u>
For further information conc	erning this matter, please	e call:		
Tracey Pion		at	781	363-6100
	(Name of Contact Persor	n)	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the f	ollowing amount made p	ayable to the Florida Do	epartment of	State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing A		Stre	et Address	·

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FI. 32303

Articles of Amendment to Articles of Incorporation of



The Beach Theatre Community Foundation, Inc.

(Name of Corporation as currently filed with the Flo	rida Dept. of State)	
N21000011726		
(Document)	Number of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006. Florida samendment(s) to its Articles of Incorporation:	Statutes, this Florida Not Fo	or Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
N/A		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	rporation" or "incorporated	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDR	(ESS)	
	 -	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) <u>N/A</u>	
	 	
D. If amending the registered agent and/or registere new registered agent and/or the new registered of		, enter the name of the
NIA	·	
Name of New Registered Agent:		
New Registered Office Address:	(F	lorida street address)
N/A		Florida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Regis	tered Agent:	
I hereby accept the appointment as registered agent. 1	am familiar with and accept	the obligations of the position.
. 1		
<u>_ N/-</u>	A Signature of New Regist	tered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X.Change X. Remove X. Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Si	ones	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) × Change Add	<u>P</u>	_	Scott, Christopher	315 Corey Avenue, St. Pete Beach,
Remove				
2) × Change Add	V	_	Brodersen, Thomas A.	350 Corey Avenue, St. Pete Beach,
Remove 3)	T	_	Kline, Jack	10 Rivage, Newport Coast, CA 926
4) Change Add	<u>S</u>	_	Nichols, Shana	1020 E Powhatan Avenue, Tampa.
Remove				
5) Change Add		_		
Remove				
6) Change Add		_		
Remove				
E. If amending or additional sheet			cles, enter change(s) here: (Be specific)	
Note - No change to: Tit	le: D Na	me: Bisa	nz, Hendrick Address: 449 Corev Avenue, St	. Pete Beach. FL 33706

	/
	·
The date of each amendment(s) adoption:date this document was signed.	if other than the
Effective date if applicable: (no more than 90 days a	
(no more than 90 days a	fier amendment file date)
<u>Note:</u> If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as the

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

Dated	9/15/2022
Signaty	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Thomas A. Brodersen , Esq.
	(Typed or printed name of person signing)

(Title of person signing)