2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2022
Secretary of State
2674533212CC

DOCUMENT# 711426

Entity Name: THE MARION PLAYERS, INC.

Current Principal Place of Business:

4337 E. SILVER SPRINGS BLVD.
OCALA, FL 34470-5001

Current Mailing Address:

4337 E. SILVER SPRINGS BLVD.
OCALA, FL 34470-5001 US

FEI Number: 23-7101051

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILLER, ROSENDA
4337 E. SILVER SPRINGS BLVD.
OCALA, FL 34470-5001 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: ROSENDA MILLER 03/28/2022

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT
Name	ZINK, LAURIE
Address	2008 SE 37TH COURT CIR
City-State-Zip:	OCALA FL 34471

Title	TREASURER
Name	EASTMAN, JACKIE
Address	13885 SE 47TH STREET RD
City-State-Zip:	OCKLAWAHA FL 32179

Title	ARTISTIC DIRECTOR
Name	PLOOF, KATHERINE KATRINA
Address	3848 NE 17TH STREET CIRCLE
City-State-Zip:	OCALA FL 34470

Title	OTHER
Name	BELOTE , GLENDA PHD
Address	6098 SW 104TH ST
City-State-Zip:	OCALA FL 34476

Title	VP
Name	HILTY, JAMES
Address	1906 CLATTERBRIDGE RD
City-State-Zip:	OCALA FL 34471

Title	DIRECTOR OF BUSINESS AND DEVELOPMENT
Name	MILLER, ROSENDA E ROSIE
Address	387 CIDERMILL PLACE
City-State-Zip:	LAKE MARY FL 32746

Title	SECRETARY
Name	SMITH, HEATHER A
Address	2632 SE 30TH PL
City-State-Zip:	OCALA FL 34471

Title	OTHER
Name	FRYNS, JENNIFER PHD
Address	11764 SW 57TH TER
City-State-Zip:	OCALA FL 34476

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: ROSENDA MILLER DIRECTOR OF BUSINESS AND DEVELOPMENT 03/28/2022

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	OTHER
Name	HENNINGSEN, JEANNE M.S. CPC
Address	722 SE 17TH AVE
City-State-Zip:	OCALA FL 34471

Title	OTHER
Name	SCHLENKER, DAVE
Address	4415 SE 15TH ST
City-State-Zip:	OCALA FL 34471

Title	OTHER
Name	STEWART, ED MD
Address	1515 SE 27TH TER
City-State-Zip:	OCALA FL 34471