

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 718666

**Entity Name:** THEATRE WINTER HAVEN, INC.**Current Principal Place of Business:**210 CYPRESS GARDENS BLVD., SW  
WINTER HAVEN, FL 33880**Current Mailing Address:**P.O. BOX 1230  
WINTER HAVEN, FL 33882-8230**FEI Number:** 59-1950683**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JOINER, JAMES T  
880 1ST SOUTH  
WINTER HAVEN, FL 33880 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            TREASURER, BOARD MEMBER  
Name           BRINSON, JENNINGS KEMP  
Address        101 S. LAKE HOWARD DR.  
City-State-Zip: WINTER HAVEN FL 33880

Title            PRESIDENT, BOARD MEMBER  
Name           RIGGS, MARILYN  
Address        137 HAMPDEN ROAD  
City-State-Zip: WINTER HAVEN FL 33884

Title            BMBR  
Name           FISCHER, KATHY  
Address        1066 W LAKE OTIS DR  
City-State-Zip: WINTER HAVEN FL 33880

Title            BUSINESS DIRECTOR  
Name           GALLEGOS, ANTHONY  
Address        210 CYPRESS GARDENS BLVD., SW  
City-State-Zip: WINTER HAVEN FL 33880

Title            SECRETARY, BOARD MEMBER  
Name           BATES, SHARON  
Address        9138 LAKE RUBY DRIVE  
City-State-Zip: WINTER HAVEN FL 33884

Title            BMBR  
Name           NAT , BIRDSONG  
Address        111 AVE. R, NE  
City-State-Zip: WINTER HAVEN FL 33881

Title            CEO  
Name           CHESNICKA, DANIEL JOSEPH  
Address        1035 HARDEN COURT  
City-State-Zip: LAKELAND FL 33813

Title            DEVELOPMENT DIRECTOR  
Name           REYNOLDS, SARA BETH  
Address        210 CYPRESS GARDENS BLVD., SW  
City-State-Zip: WINTER HAVEN FL 33880

*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: ANTHONY GALLEGOS****BUSINESS DIRECTOR****01/15/2020**

Electronic Signature of Signing Officer/Director Detail

Date