

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723282

Entity Name: SUNCOAST YOUNG PEOPLE'S THEATRE, INC**Current Principal Place of Business:**6237 GRAND BOULEVARD
NEW PORT RICHEY, FL 34652**Current Mailing Address:**P.O. BOX 188
NEW PORT RICHEY, FL 34656-0188 US**FEI Number: 59-1406158****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILLIAMS, RICHARD CJR
6337 GRAND BLVD
NEW PORT RICHEY, FL 34652 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	PD
Name	JAMESON, MARK D
Address	6237 GRAND BLVD
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	VPD
Name	SCHEUER, ALMA
Address	6237 GRAND BLVD
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	TD
Name	SHAPIRO, LARRY
Address	6237 GRAND BLVD
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	SD
Name	PLUMMER, BEVERLY
Address	6237 GRAND BLVD
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	BD
Name	JACK, MARIANO
Address	6237 GRAND BLVD.
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	BD
Name	THOMAS, JUDY D
Address	6237 GRAND BLVD.
City-State-Zip:	NEW PORT RICHEY FL 34652

Title	BD
Name	PASSARELLA, CARMEN
Address	6237 GRAND BLVD
City-State-Zip:	NEW PORT RICHEY FL 34652

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: MARK D. JAMESON**PD****02/18/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date