		Title DIRECTOR
Title	DIRECTOR	

**Current Principal Place of Business:** 

700 W WEATHERBEE RD FORT PIERCE, FL 34982 US

SIGNATURE: ROSEMARY KNIGHT

## FEI Number: 23-7378281

DOCUMENT# 725431

700 W WEATHERBEE RD FORT PIERCE, FL 34982

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

Entity Name: ST LUCIE COMMUNITY THEATRE INC

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

KNIGHT, ROSEMARY 3975 NW DEER OAK DR JENSEN BEACH, FL 34957 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.

Officer/Director Detail :					
Title	VP	Title	RS/D		
Name	DIONNE, STEVEN P	Name	PARKER-EARLL, LESLIE		
Address	6709 WOODS ISLAND CIR	Address	2138 SE SHELTER DRIVE		
City-State-Zip:	#108 PORT ST LUCIE FL 34982	City-State-Zip:	PORT ST LUCIE FL 34952		
Title	TREASURER	Title	CS/D		
Name	DEMPSEY, COLBY	Name	AMARU, DONNA		
Address	462 SW EXMORE STREET	Address	132 NW BROKEN OAK TRAIL		
		City-State-Zip:	JENSEN BEACH FL 34957		
City-State-Zip:	PORT ST LUCIE FL 34983	Title	PRESIDENT		
Title	D	Name	KNIGHT, ROSEMARY		
Name	SCOTTI, ROBERT		3975 NW DEER OAK DRIVE		
Address	976 NW TUSCANY	Address			
City-State-Zip:	PORT ST LUCIE FL 34986	City-State-Zip:	JENSEN BEACH FL 34957		
		Title	DIRECTOR		
Title	DIRECTOR	Name	FINLEY, MERCEDES		
Name	YAHN, CHARLES A	Address	11103 MULLER ROAD		
Address	648 LITTLE KAYAK POINT	City-State-Zip:	FORT PIERCE FL 34945		
City-State-Zip:	PORT ST LUCIE FL 34983				

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: ROSEMARY KNIGHT

PRESIDENT

06/08/2015

Electronic Signature of Signing Officer/Director Detail

06/08/2015 Date

Certificate of Status Desired: No