

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 744858

**Entity Name:** FLAGLER PLAYHOUSE, INC

**Current Principal Place of Business:**

301 E MOODY BLVD  
BUNNELL, FL 32110

**Current Mailing Address:**

301 E MOODY BLVD  
BUNNELL, FL 32110

**FEI Number:** 59-1883034

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BOWMAN, RICHARD F  
89 OCEAN OAKS LANE  
PALM COAST, FL 32137 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           DIRECTOR, PRESIDENT  
Name           LOVE, PATRICIA  
Address        417 PALM DRIVE  
City-State-Zip: FLAGLER BEACH FL 32136

Title           DIRECTOR, SECRETARY  
Name           MCARDLE, KATHY  
Address        29 OSPREY CIRCLE  
City-State-Zip: PALM COAST FL 32137

Title           DIRECTOR  
Name           HOWELL, NANCY  
Address        139 PUTTER DRIVE  
City-State-Zip: PALM COAST FL 32164

Title           DIRECTOR, TREASURER  
Name           BOWMAN, RICHARD F  
Address        89 OCEAN OAKS LANE  
City-State-Zip: PALM COAST FL 32137

Title           DIRECTOR  
Name           MCNULTY, MONICA  
Address        3502 MIDDLEMORE LANE  
City-State-Zip: ORMOND BEACH FL 32174

Title           DIRECTOR, VP  
Name           VAN BRINK, LESLIE  
Address        2 WALLIS PLACE  
City-State-Zip: PALM COAST FL 32164

*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:** RICHARD F BOWMAN

**TREASURER**

**02/14/2013**

Electronic Signature of Signing Officer/Director Detail

Date