

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 753708

**Entity Name:** ACROSSTOWN REPERTORY THEATRE WORKSHOP, INC.

**Current Principal Place of Business:**

619 SOUTH MAIN STREET  
GAINESVILLE, FL 32601

**Current Mailing Address:**

P.O. BOX 12254  
GAINESVILLE, FL 32604 US

**FEI Number:** 59-2737556

**Certificate of Status Desired:** No

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

SIMON, ZACHARY  
619 S MAIN ST  
GAINESVILLE, FL 32601 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:** ZACHARY SIMON

04/29/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SALT, CAROLYNE  
Address        P.O. BOX 12254  
City-State-Zip: GAINESVILLE FL 32604

Title            TREASURER  
Name            SIMON, ZACHARY  
Address        P.O. BOX 12254  
City-State-Zip: GAINESVILLE FL 32604

*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:** SIMON, ZACHARY

TREASURER

04/29/2022

Electronic Signature of Signing Officer/Director Detail

Date