

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000001723

Entity Name: ST. PETERSBURG OPERA COMPANY**Current Principal Place of Business:**2145 FIRST AVE. S
ST. PETERSBURG, FL 33712**Current Mailing Address:**2145 1ST AVE S
ST PETERSBURG, FL 33712 US**FEI Number:** 20-8523525**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SFORZINI, MARK
2145 FIRST AVE. S
ST PETERSBURG, FL 33712 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:** MARK SFORZINI

02/08/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title GENERAL DIRECTOR
Name SFORZINI, MARK
Address 215 S HALE
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name SMITH, MIRELLA
Address 600 55TH AVE.
City-State-Zip: ST. PETE BEACH FL 33706

Title DIRECTOR, SECRETARY
Name HUDSON, JANE
Address 470 3RD ST S
APT 811
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR
Name GILBERT, MICHELE KIDWELL
Address 2220 PELHAM RD N
City-State-Zip: ST. PETERSBURG FL 33710

Title DIRECTOR, PRESIDENT
Name NUCCI, PAUL
Address 412 65TH ST N
City-State-Zip: ST. PETERSBURG FL 33710

Title DIRECTOR, VP
Name SCHNEIDER, THOMAS
Address 6326 ROCK CREEK CIR
City-State-Zip: ELLENTON FL 34222

Title DIRECTOR
Name ABERNATHY, ROBERT
Address 12055 GANDY BLVD.
UNIT 263
City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR
Name CURLIN, ROGER
Address 4535 6TH AVE N
City-State-Zip: ST. PETERSBURG FL 33713

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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 SFORZINI

GENERAL DIRECTOR

02/08/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DOBBERSTEIN, KARA LYNN
Address 1390 GULF BLVD
City-State-Zip: CLEARWATER FL 33767

Title DIRECTOR
Name BRILEY, GAIL
Address 8333 SEMINOLE BLVD.
APT 356
City-State-Zip: SEMINOLE FL 33772

Title DIRECTOR
Name EICHHOF, ARNOLD
Address 100 2ND AVE NORTH
SUITE 240
City-State-Zip: ST. PETERSBURG FL 33701

Title TREASURER
Name DAVIS, MICHAEL
Address 1613 N OSCEOLA AVE
City-State-Zip: CLEARWATER FL 33755

Title DIRECTOR
Name BELLAFANTE, SUSANNA
Address 5200 BRITTANY DRIVE SOUTH
#702
City-State-Zip: ST. PETERSBURG FL 33715