## **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000001272

Entity Name: ISLAND CITY STAGE, INC.

Current Principal Place of Business:

2304 N DIXIE HWY

WILTON MANORS. FL 33305

**Current Mailing Address:** 

2304 N DIXIE HWY

WILTON MANORS. FL 33305 US

FEI Number: 45-4264114 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CHILDERS, MARTIN 2304 N. DIXIE HWY

WILTON MANORS, FL 33305 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: MARTIN CHILDERS 01/08/2021

Electronic Signature of Registered Agent

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Officer/Director Detail:

Title DIRECTOR Title D

Name ANDY, FISCHMAN Name LOPEZ, NIKI

Address 2840 S OAKLAND FORREST DR. Address 1310 SW 2ND COURT #109

2404

City-State-Zip: FORT LAUDERDALE FL 33308

Title SECRETARY

Name BOYETTE, THEL Name LINDEBLOM, GREG

Address 2601 NE 14TH AVENUE #110

Address 2334 S CYPRESS BEND DRIVE #101

City-State-Zip: POMPANO BEACH FL 33069

Title PRESIDENT
Title TREASURER

Name HASHEK, ED

Address 2929 E COMMERCIAL BLVD. PH-D Address 4100 GALT OCEAN DRIVE #911

City-State-Zip: FORT LAUDERDALE FL 33308

City-State-Zip: FORT LAUDERDALE FL 33308

Title

 Title
 VP
 Name
 KARLIN, RICK

 Name
 RATCLIFFE, DAVID
 Address
 1517 NE 1ST AVE.

Address 2800 E SUNRISE BOULEVARD City-State-Zip: FORT LAUDERDALE FL 33304

City-State-Zip: FORT LAUDERDALE FL 33304

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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: ED HASHEK PRESIDENT 01/08/2021

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 08, 2021

**Secretary of State** 

4079010010CC

Date

## Officer/Director Detail Continued:

Title D

Name SHAPIRO, HARVEY

Address 2316 NW 7TH AVE.

City-State-Zip: WILTON MANORS FL 33311

Title D

NameROBERTSON, LORENZOAddress11670 NW 56TH DRIVE #109City-State-Zip:CORAL SPRINGS FL 33076

Title D

Name WILDER, SUE

Address 333 SUNSET DRIVE

APT. 503

City-State-Zip: FORT LAUDERDALE FL 33301