## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12673

Entity Name: LOCAL 412, MANATEE AND SARASOTA COUNTY, INTERNATIONAL ALLIANCE OF THEATRICAL STAGE EMPLOYEES AND MOVING PICTURE OPERATORS OF THE UNITED STATES AND CANADA, INC.

**FILED** Mar 31, 2020 **Secretary of State** 3699200161CC

## **Current Principal Place of Business:**

3650 HENRIETTA PLACE SARASOTA, FL 34234

## **Current Mailing Address:**

P.O. BOX 1307

TALLEVAST, FL 34270-1307 US

FEI Number: 59-2710633 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

WALLENDA-ZOPPE, TINO 3650 HENRIETTA PLACE SARASOTA, FL 34234 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** Title **PRESIDENT** 

Name SORENSEN, ROY Name WALLENDA-ZOPPE, TINO Address 3201 RIDGEVIEW DR Address 3650 HENRIETTA PLACE City-State-Zip: SARASOTA FL 34234

City-State-Zip: SARASOTA FL 34235-6659

Title **SECRETARY** Title **TREASURER** 

Name PASQUINI, MICHAEL Name ELLIS, JEFFREY

Address P.O. BOX 1307 Address P.O. BOX 1307

City-State-Zip: TALLEVAST FL 34270-1307 City-State-Zip: **TALLEVAST FL 34270-1307** 

Title VΡ

Name CLARKE, CRAIG Address P.O. BOX 1307

City-State-Zip: TALLEVAST FL 34270-1307

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: MICHAEL PASQUINI

**TREASURER** 

03/31/2020