

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30352

Entity Name: ORLANDO SHAKESPEARE THEATER, INC.**Current Principal Place of Business:**812 E ROLLINS ST
STE 100
ORLANDO, FL 32803**Current Mailing Address:**812 E ROLLINS ST
STE 100
ORLANDO, FL 32803 US**FEI Number:** 59-2931698**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**F& L CORP
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202 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	PD
Name	GILBERT, SUZANNE
Address	460 E JACKSON STREET #3
City-State-Zip:	ORLANDO FL 32801

Title	CH
Name	LOWNDES, RITA
Address	1308 GREEN COVE ROAD
City-State-Zip:	WINTER PARK FL 32789

Title	V
Name	LORD, JOHN S
Address	100 S EOLA DRIVE NO 509
City-State-Zip:	ORLANDO FL 32801

Title	T
Name	KLING, JILL
Address	1254 GLASTONBERRY RD
City-State-Zip:	MAITLAND FL 32751

Title	VP
Name	BIAS, SHIRLEY
Address	1840 THE OAKS BOULEVARD
City-State-Zip:	WINDERMERE FL 34786

Title	MGDR
Name	ALBERT, PJ
Address	812 E ROLLINS ST STE 100
City-State-Zip:	ORLANDO FL 32803

Title	SECRETARY
Name	BOSCO, DEAN
Address	2937 OBERLIN AVE
City-State-Zip:	ORLANDO FL 32804

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: PJ ALBERT**MANAGING DIRECTOR****03/13/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date