

**2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000003962

**Entity Name:** THEATRESOUTH ATLANTA, INC.

**Current Principal Place of Business:**

815 N. HOMESTEAD BLVD ST. 155  
HOMESTEAD, FL 33030

**Current Mailing Address:**

815 N. HOMESTEAD BLVD ST 155  
HOMESTEAD, FL 33030 US

**FEI Number: 33-1197536**

**Certificate of Status Desired: No**

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

JONES, HERMAN L  
815 N HOMESTEAD BLVD  
SUITE 155  
HOMESTEAD, FL 33030 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	P
Name	JONES, YONNICK
Address	12935 SW 218TH TERR APT 609
City-State-Zip:	MIAMI FL 33170
Title	VC
Name	DAVIS, SAMANTHA
Address	815 N. HOMESTEAD BLVD ST. 155
City-State-Zip:	HOMESTEAD FL 33030

Title	S
Name	JONES, CAROLYN
Address	27410 SW 167 AVE
City-State-Zip:	HOMESTEAD FL 33031
Title	CEO
Name	JONES, HERMAN
Address	815 NORTH HOMESTEAD BOULEVARD SUITE
City-State-Zip:	HOMESTEAD FL 33030

*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: HERMAN JONES**

**CEO**

**03/31/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date