2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 02, 2006 8:00 am Secretary of State

ANNUAL REPORT							Secretary of State					
DOCUMENT # 702292 1. Entity Name THE NORTON GALLERY AND SCHOOL OF ART, INC.								03-02-200	•			
Principal Place of Business 1451 SOUTH OLIVE AVENUE WEST PALM BEACH, FL 33401			Mailing Address 1451 SOUTH OLIVE AVENUE WEST PALM BEACH, FL 33401				AUUEE 1600	1.4	E 2 2 11 11 12 14 15 15 15 15 15 15 15	BERN BIRIN BERN	148F 81 1881	
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				02222006 _C	ng-NP	CR2E037	' (11/05)		
City & State	е		City & State					4. FEI Number Applied Fo 59-0624432 Not Applie			t Applicable	
Zip		Country	Zi	p	Сои	ntry		5. Certificate of Status Desired S8.75 Addition Fee Required				
	6. Name	and Address of Current I	Register	ad Agent				7. Name and Add	ress of New I	Registered A	gent	
ORR-CAHILL, CHRISTINA 1451 S. OLIVE AVE. WEST PALM BEACH, FL 33401				 - -			rme Orr-Cahall, Christina eet Address (P.O. Box Number is Not Acceptable)					
					-	City FL Zip Code					3	
	named entit	y submits this statement for tered agent.	r the purp	oose of changing its re	gistere	d office or	register	red agent, or both, in	the State of F	lorida. I am fa	miliar with, a	and accept
SIGNATURE .	Chru Signature, typed	stm Om or printed name of registered agent a	_ &	JACOL (NOTE: R	legistered	I Agent signat	ure required	t when reinstating)		Q G	14/01	
Filing Fee is \$61.25 9. Election Campaig Due by May 1, 2006 Trust Fund Contril				-	_		\$5.00 May Be Added to Fees		Make check rida Departi			
10.		OFFICERS AND DIF	RECTORS		11.			ADDITIONS/CHANG	ES TO OFFICE	ERS AND DIR	ECTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5058 SOL	VILLIAM K JTH FLAGLER DR STE		Detete	TITLE NAME STREE		TD Peterso	en, Suzy burn Drive			Change X	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOHNSTON, HARRY			☐ Delete	ele TITLE NAME STREET CITY-S		Lake	Worth, FL 33460			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	100PARK	L, HAMISH (AVE RK, NY 10017		₩ Delete			229 V: Palm I	an, Shirley ia Las Brisas Beach, FL 33480			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	I	LTON EAKERS ROW N-21 EACH, FL 33480		🖎 Delete				, Anne orth Woods Road Beach, FL 33480			Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1451 SOL	HALL, CHRISTINA JTH OLIVE AV ALM BEACH, FL		☐ Delete			SD				☐ Change	Addition
TITLE NAME STREET ADDRESS	SD JAFFE, E 333 SUN			☐ Delete			Niblac 127 O	ck, John cean view Road Beach, FL 33480			Change	☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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Chrustina	<u>Om-</u>	(Jamo)	Q_{\perp}
SIGNATURE AND TYPED OR PRINT	ED NAME OF SIG	NING OFFICER OR D	RECTO