

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 30, 2006 8:00 am
Secretary of State

03-30-2006 90030 013 ****61.25

DOCUMENT # 704215

1. Entity Name

TITUSVILLE ART LEAGUE INC



Principal Place of Business

1421 DRAA RD
TITUSVILLE FL 32782
US

Mailing Address

PO BOX 6133
TITUSVILLE FL 32782-6133
US



2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/05)

City & State

City & State

4. FEI Number

23-7167540

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WINFOUGH, ANITA
2580 TULIPS TRAIL
TITUSVILLE FL 32780

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME SHOEMAKER, JENNI
STREET ADDRESS 2825 COOPER DR
CITY-ST-ZIP TITUSVILLE FL 32796

TITLE 1VD ☐ Delete
NAME COLLISTER, B J
STREET ADDRESS PO BOX 1436
CITY-ST-ZIP GENEVA FL 32732

TITLE VD ☐ Delete
NAME MORGAN, DEBRA
STREET ADDRESS 996 CAROLINA CIR
CITY-ST-ZIP TITUSVILLE FL 32796

TITLE SD ☐ Delete
NAME MERCKSON, JOY
STREET ADDRESS 2940 JACARANDA TRAIL
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE TD ☐ Delete
NAME LUTHER, JOYCE
STREET ADDRESS 1735 HARRISON ST, #230
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE CSD ☐ Delete
NAME ALTON, MARLENE
STREET ADDRESS 5220 AMY WAY
CITY-ST-ZIP MIMS FL 32754

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1735 HARRISON ST. #230
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE:

Joyce M. Luther JOYCE M. LUTHER

3/23/06

321-268-1644

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #