

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752196

FILED
Jan 06, 2006
Secretary of State

Entity Name: THE ARTS COUNCIL, INC.

Current Principal Place of Business:

80 E. OCEAN BLVD.
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

80 E. OCEAN BLVD.
STUART, FL 34994

New Mailing Address:

FEI Number: 59-2015691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATERS, JENNIFER
1100 S FEDERAL HWY
STUART, FL 34994 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: SED () Delete
Name: TURRELL, NANCY K
Address: 80 E OCEAN BLVD
City-St-Zip: STUART, FL 34994

Title: D () Delete
Name: VAINA, KAREN
Address: 1969 SW ST ANDREWS DR
City-St-Zip: PALM CITY, FL 34990

Title: CD () Delete
Name: PRICE, CRAIG
Address: 2311 PINECREST LAKES BLVD
City-St-Zip: JENSEN BEACH, FL 34957

Title: TD () Delete
Name: GROVE, DAVE
Address: 1510 SW PALM CITY RD
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CD (X) Change () Addition
Name: VAINA, KAREN
Address: 1969 SW ST ANDREWS DR
City-St-Zip: PALM CITY, FL 34990

Title: D (X) Change () Addition
Name: PRICE, CRAIG
Address: 2311 PINECREST LAKES BLVD
City-St-Zip: JENSEN BEACH, FL 34957

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: NANCY TURRELL

SED

01/06/2006

Electronic Signature of Signing Officer or Director

Date