

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **762671** (6)
1. Corporation Name
ENGLEWOOD ART GUILD, INC.



Principal Place of Business DAVID A DUNKIN 170 W DEARBORN ENGLEWOOD FL 34223	Mailing Address DAVID A DUNKIN 170 W DEARBORN ENGLEWOOD FL 34223
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3. Date Incorporated or Qualified 03/30/1982	Applied For ☐ Not Applicable
4. FEI Number 50-2274745	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DUNKIN, DAVID
170 W DEARBORN
ENGLEWOOD FL 34223

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☐ DELETE	1.1 TITLE	VD ☐ Change ☒ Addition
NAME	BALDWIN, ATHELIA	1.2 NAME	GUNGER, BARBARA
STREET ADDRESS	14 ANNAPOLIS LN	1.3 STREET ADDRESS	6796 Gasparilla Pines Blvd, #9
CITY-ST-ZIP	ROTONDA WEST FL 33947	1.4 CITY-ST-ZIP	Englewood, FL 34224
TITLE	VD ☒ DELETE	2.1 TITLE	S ☐ Change ☒ Addition
NAME	BARINGER, JOAN	2.2 NAME	ROSENTHAL, ROSLYN
STREET ADDRESS	1016 KART STREET	2.3 STREET ADDRESS	21 Brentwood Lane
CITY-ST-ZIP	ENGLEWOOD FL	2.4 CITY-ST-ZIP	Englewood, FL 34223
TITLE	S ☒ DELETE	3.1 TITLE	T ☐ Change ☒ Addition
NAME	STRONG, MARION	3.2 NAME	FRANCIS, ELVIRA
STREET ADDRESS	72 GOLFVIEW ROAD	3.3 STREET ADDRESS	13 Bunker Circle
CITY-ST-ZIP	ROTONDA WEST FL	3.4 CITY-ST-ZIP	Rotonda West, FL 33947
TITLE	TD ☒ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	WHITMAN, CORLEEN	4.2 NAME	
STREET ADDRESS	250 SPORTSMAN RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	ROTONDA WEST FL 33947	4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	7000024638 ☐ Change ☐ Addition
NAME		6.2 NAME	-03/20/98--01037--035
STREET ADDRESS		6.3 STREET ADDRESS	***\$61.25
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Atelia Baldwin

3/12/98

697-0861

CR2E037 (10/97)