

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000205

FILED
May 31, 2007
Secretary of State

Entity Name: MUSEUM OF LIFESTYLE & FASHION HISTORY, INC.

Current Principal Place of Business:

1030 SOUTH FEDERAL HIGHWAY
SUITE 112
DELRAY BEACH, FL 33483

New Principal Place of Business:

1030 SOUTH FEDERAL HIGHWAY
SUITE 112
DELRAY BEACH, FL 33483 US

Current Mailing Address:

POST OFFICE BOX 6127
DELRAY BEACH, FL 33482

New Mailing Address:

POST OFFICE BOX 6127
DELRAY BEACH, FL 33482 US

FEI Number: 65-0999010 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DURANTE, CHARLOTTE G
4165 NW 10TH STREET
DELRAY BEACH, FL 33445 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: PTD () Delete
Name: DURANTE, CHARLOTTE G
Address: 4165 NW 10 ST
City-St-Zip: DELRAY BEACH, FL 33445

Title: SD () Delete
Name: STEPHENSON, DINAH
Address: 4785 TREEFERN DR.
City-St-Zip: DELRAY BEACH, FL 33445

Title: CD () Delete
Name: CAMPBELL, DOAK III
Address: 70 SE 4TH AVE
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: DURANTE, CHARLOTTE G
Address: 4165 NW 10 ST
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: SD (X) Change () Addition
Name: STEPHENSON, DINAH
Address: 4785 TREEFERN DR.
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: CD (X) Change () Addition
Name: CAMPBELL, DOAK III
Address: 70 SE 4TH AVE
City-St-Zip: DELRAY BEACH, FL 33483 US

I hereby certify that the information supplied with this filing does not qualify 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: CHARLOTTE G. DURANTE

PTD

05/31/2007

Electronic Signature of Signing Officer or Director

Date