


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2005 8:00 am
Secretary of State

01-21-2005 90057 004 ****61.25

DOCUMENT # N00453						
1. Entity Name ISLAND ART ASSOCIATION, INC.						
Principal Place of Business 18 N 2ND STREET FERNANDINA BEACH, FL 32034			Mailing Address POST OFFICE BOX 1251 FERNANDINA BEACH, FL 32035-1251 US			
2. Principal Place of Business			3. Mailing Address			
Suite, Apt. #, etc.			Suite, Apt. #, etc.			
City & State			City & State			
Zip		Country	Zip		Country	
4. FEI Number 59-2353054				Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent			
DAILY, THERESA 1631 PLANTATION OAKS LANE AMELIA ISLAND, FL 32034			Name <u>Diana Tyson</u>			
			Street Address (P.O. Box Number is Not Acceptable) <u>3358 Old Nassauville Road</u>			
			City <u>Fernandina Beh</u>		FL	Zip Code <u>32034</u>
			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 <u>Diana Tyson</u>		Diana Tyson		1-20-05		
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	MCFADYEN, KAREN		NAME	Roger Moore		
STREET ADDRESS	316 LIGHTHOUSE LN.		STREET ADDRESS	57 Laurel Drive		
CITY-ST-ZIP	FERNANDINA BEACH, FL 32034		CITY-ST-ZIP	Fernandina Bch, FL 32034-6525		
TITLE	VP	<input checked="" type="checkbox"/> Delete	TITLE	VP	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	COOPER, JOHN		NAME	Milt Shirley		
STREET ADDRESS	PO BOX 985		STREET ADDRESS	86313 N. Hampton Club Way		
CITY-ST-ZIP	FERNANDINA BEACH, FL 32034		CITY-ST-ZIP	Fernandina Bch, FL 32034		
TITLE	VP	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MULLIS, GERORGANNA		NAME			
STREET ADDRESS	PO BOX 753		STREET ADDRESS			
CITY-ST-ZIP	FERNANDINA BEACH, FL 32034		CITY-ST-ZIP			
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	T	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	DAILY, THERESA		NAME	Diana Tyson		
STREET ADDRESS	1631 OCEAN FOREST DR.		STREET ADDRESS	3358 Old Nassauville Road		
CITY-ST-ZIP	FERNANDINA BEACH, FL 32034		CITY-ST-ZIP	Fernandina Bch FL 32034		
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BADENOCK, SHARON		NAME			
STREET ADDRESS	6 JUNIPER DR.		STREET ADDRESS			
CITY-ST-ZIP	AMELIA ISLAND, FL 32034		CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
12. 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 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 a power like empowered.						
SIGNATURE: <u>Diana Tyson</u>		1-20-05		904-261-6333		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #		