

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001686

FILED  
May 23, 2005  
Secretary of State

**Entity Name:** NORTHEAST FLORIDA FOUNDATION OF THE ARTS INC

**Current Principal Place of Business:**

4495-304 ROOSEVELT BLVD  
SUITE 345  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

2 INDEPENDENT DRIVE W.  
SUITE 110  
JACKSONVILLE, FL 32202

**Current Mailing Address:**

4495-304 ROOSEVELT BLVD  
SUITE 345  
JACKSONVILLE, FL 32210

**New Mailing Address:**

4495-304 ROOSEVELT BLVD.  
SUITE 345  
JACKSONVILLE, FL 32210

**FEI Number:** 20-0745972      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

MCDUFFIE, DEBORAH J  
4256 MATADOR DRIVE  
JACKSONVILLE, FL 32210      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: P      ( ) Delete  
Name: MCDUFFIE, DEBORAH J  
Address: 4256 MATADOR DRIVE  
City-St-Zip: JACKSONVILLE, FL 32210

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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 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: DEBORAH J MCDUFFIE

PRES

05/23/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date