

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Sep 28, 2010
Secretary of State**

DOCUMENT# N09000001824

Entity Name: AUGUSTA SAVAGE ARTS & COMMUNITY CENTER, INC.**Current Principal Place of Business:**428 WALNUT ST
GREEN COVE SPRINGS, FL 32043**New Principal Place of Business:**701 N MILL ST.
GREEN COVE SPRINGS, FL 32043**Current Mailing Address:**428 WALNUT ST
GREEN COVE SPRINGS, FL 32043**New Mailing Address:**701 N MILL ST.
GREEN COVE SPRINGS, FL 32043

FEI Number: 26-4325976

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:DUVAL, STEPHEN J CPA
428 WALNUT ST
GREEN COVE SPRINGS, FL 32043 US**Name and Address of New Registered Agent:**HENRY, MICHAEL DR.
701 N. MILL ST.
GREEN COVE SPRINGS, FL 32043 US

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: DR. MICHAEL HENRY

09/28/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: D
Name: HENRY, MICHAEL DR.
Address: 701 N. MILL ST.
City-St-Zip: GREEN COVE SPRINGS, FL 32043 USTitle: D
Name: BUTLER, CONSTANCE
Address: 718 N. CYPRESS ST.
City-St-Zip: GREEN COVE SPRINGS, FL 32043 USTitle: D
Name: JACKSON, SUBRENIA
Address: 3220 CANYON FALLS DR.
City-St-Zip: GREEN COVE SPRINGS, FL 32043

I hereby 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 all other like empowered.

SIGNATURE: DR. MICHAEL HENRY

D

09/28/2010

Electronic Signature of Signing Officer or Director

Date