2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Secretary of State DOCUMENT # N18265 1. Entity Name 05-07-2001 90008 009 ****61.25 FLORIDA ASSOCIATION OF LOCAL ARTS AGENCIES, INC. Principal Place of Business Mailing Address 5600 POINSETTIA AVE. PO BOX 3486 #1410 WEST PALM BEACH FL 33402 WEST PALM BEACH FL 33407 2. Principal Place of Business 3. Mailing Address 5600 N. FLAGLER DO NOT WRITE IN THIS SPACE Suite, Apt. #. etc. Suite, Apt. #, etc. # 1410 4. FEI Number City & State Applied For City & State 53-2952677 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) LONG. SHERRON 5600 POISNETTH AVE. N. FLAGLER DR. #1410 Zip Code WEST PALM BEACH FL 33407 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. SIGNATURE DATE (NOTE: Fleg stered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: Trust Fund Contribution. Department of State Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. mitared 0 herri ☐ Change VPD TITLE ☐ Delate TITLE BECHT, MARY NAME STREET ADDRESS 100 S ANDREWS AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL Change ☐ Delete TITLE TITLE CASWELL, PATRICIA NAME NAME 1351 FRUITVILLE RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST - ZIP SARASOTA FL ☐ Change ■ Addition ☐ Delete TITLE TITLE KEEBLE, ARTHUR NAME MAME STREET ADDRESS STREET ADDRESS 725 E KENNEDY ST CITY-ST-ZIP CITY-ST-ZIP TAMPA FL ☐ Change ☐ Addition **Delete** TITLE TITLE NAME BOYD, NORRIS STREET ADDRESS 10840 MADISON DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOYNTON BEACH FL 33437** ☐ Change ☐ Addition Delete TITLE TITLE NAME BURKE, KAY E STREET ADDRESS 2725 JUDGE FEAN JAMIESON WAY, C202 STREET ADDRESS CFTY - ST - ZIP CITY-ST-ZiP VIERA FL 32940 ☐ Change ☐ Addition ☐ Delete TITLE TITLE HASKELL, MONICA NAME NAME STREET ADDRESS 5100 COLLEGE RD STREET ADDRESS CITY-ST-ZIP KEY WEST FL 33040 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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

SHERRON LONG

Daytime Phone #

FILED

Jun 02, 2001 8:00 am

5/7/