2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State
03-19-2007 90071 030 ****61.25

DOCUMENT # N41277

1. Entity Name
SOUTH FLORIDA CENTER FOR THE ARTS, INC.

66008570

Principal Place of Business	Mailing Address
PO BOX 2540 29 JOLLY ROGER DR. KEY LARGO, FL 33037	P.O. BOX 2540 KEY LARGO, FL 33037-1532 US

01232007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0230427 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JENSEN, ROBERT W. ESQUIRE 4675 PONCE DE LEON BLVD. SUITE 305 CORAL GABLES, FL 33146	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BALLARD, BROWNIE 29 JOLLY ROGER DR KEY LARGO, FL 33037	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BD Denise Rediger 212 Silver Palm Avenue TAVERNIER, FLA. 33070	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BD MIDDLETON, BEVERLY 233 BUTTONWOOD DR. KEY LARGO, FL 33037	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BD AVA STEGALL 228 BUTTONWOOD LANE TAVERNIER FL. 33070	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C LLOYD, LINDA 80100 OLD HWY ISLAMORADA, FL 33036	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BD GLORIA AVNER 106 GUMBO DR. KEY LARGO, FLA. 33037	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JELSEMA, JACK 19 JOLLY ROGER DR KEY LARGO, FL 33037	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BD NANCY PEREZ-MILLER 85960 OVERSEAS HWY. ISLAMORADO, FLA. 33036	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BD GORDON, SUSIE 1 HARBOR SHORE KEY LARGO, FL 33037	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 all other like empowered.

SIGNATURE: Brownie Ballard 3/15/07 305.853.7070
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #