

APR. 27. 2007 9:55AM

JAMES MOORE

FILED
May 30, 2007 8:00 am
Secretary of State

04-30-2007 90853 047 ****61.25

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N96000000179			
1. Entity Name ARTHAUS FOUNDATION, INC.			
Principal Place of Business 3840 RIDGEWOOD AVE. PORT ORANGE, FL 32129 US		Mailing Address P.O BOX 290232 PORT ORANGE, FL 32129 US	
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 59-3381144		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	
JENNINGS, JANE 6208 SHORE LINE DR PORT ORANGE, FL 32127		Name LAURIE GOMON RING Street Address (P.O. Box Number is Not Acceptable) 501 OCEAN DUNES RD. DAYTONA BEACH City FL Zip Code 32118	
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 <i>Jane H. Jennings</i>		DATE 4/26/07	
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PP ANDERSON, JUDY 6217 COQUINA CIR. PT ORANGE, FL 32127	☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C GOMON-RING, LAURIE 1810 JAMES STREET DAYTONA BEACH, FL 32119	☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD STUART EPSTEIN, DAVID 121 EXECUTIVE CIRCLE DAYTONA BEACH, FL 32114	☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VC NOWWISKIE, RON 275 CLYDE MORRIS BLVD ORMOND BEACH, FL 32174	☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VC MCCOY, KEN 1475 S NOVA RD. DAYTONA BEACH, FL 32114	☐ Delete	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VC TROST, JOHN P.O. BOX 291987 PORT ORANGE, FL 32128	☒ Delete	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	
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 118, 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 another like empowered.			
SIGNATURE: <i>Laurie Gomon Ring</i>		DATE MAY 24, 2007 386-767-0076	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR LAURIE GOMON RING - PRESIDENT			

66017158



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