2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2006 08:00 AM
Secretary of State

DOCUMENT # N96000003938

1. Entity Name
ART HOUSE FOUNDATION, INC.

Principal Place of Business	Mailing Address
2075 WEST FIRST ST SUITE 300 FORT MYERS, FL 33901	PO BOX 1708 FORT MYERS, FL 33902

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03262006 No Chg-NP CR2E037 (11/05)

4. FEI Number
65-0662952
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

WILTSHIRE, WILLIAM B
2075 WEST FIRST ST
FORT MYERS, FL 33901

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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, 2006

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MUDGETT, JEFF
STREET ADDRESS	3515 AVOCADO DR
CITY-ST-ZIP	FORT MYERS, FL 33901
TITLE	VP
NAME	DOCHINGER, ERIC
STREET ADDRESS	6640 PLANTATION PINES BLVD
CITY-ST-ZIP	FORT MYERS, FL 33912
TITLE	SD
NAME	HORVATH, ARLENE
STREET ADDRESS	1900 VIRGINIA AVE, #1201
CITY-ST-ZIP	FORT MYERS, FL 33901
TITLE	TD
NAME	WILTSHIRE, WILLIAM
STREET ADDRESS	6417 MARK LN
CITY-ST-ZIP	FORT MYERS, FL 33912
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: William B. Wiltshire WILLIAM B. WILTSHIRE 4/3/06 (239) 334-9191
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #