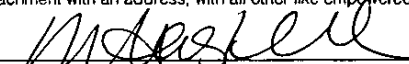


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2005 8:00 am
Secretary of State

03-10-2005 90165 037 ****70.00

DOCUMENT # N97000000960 1. Entity Name MONROE COUNCIL OF THE ARTS CORPORATION					
Principal Place of Business 1100 SIMONTON ST KEY WEST, FL 33040			Mailing Address 1100 SIMONTON ST KEY WEST, FL 33040		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		01282005 Chg-NP CR2E037 (10/03)	
Zip		Country		4. FEI Number 65-0737532	
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent HASKELL, MONICA 2819 HARRIS AVENUE KEY WEST, FL 33040			7. Name and Address of New Registered Agent 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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2005		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	V HUBERT, ROCKY 101640 OVERSEAS HWY KEY LARGO, FL 33037 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD Hubert, Rocky 101640 Overseas Hwy. Key Largo, FL 33037 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD GIRARD, JUNE SUGARLOAF SHORES SUGARLOAF, FL 33044 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Connie Groth 833 Elizabeth St. Key West, FL 33040 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HILDRETH, JACK 99551 OVERSEAS HWY KEY LARGO, FL 33037 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Hildreth, Jack 97665 Overseas Hwy. Key Largo, FL 33037 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD COHN, DAVID 89051 STATE RD 4A TAVERNIER, FL 33070 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Cohn, David 89051 State Rd. 4A Tavernier, FL 33070 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HASKELL, MONICA 2819 HARRIS AVE KEY WEST, FL 33040 ☐ 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 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 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			3-2-05 305-295-4369		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		