2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 01, 2007
Secretary of State

DOCUMENT# N97000000960

Entity Name: MONROE COUNCIL OF THE ARTS CORPORATION

Current Principal Place of Business:

1100 SIMONTON ST
KEY WEST, FL 33040

New Principal Place of Business:

1100 SIMONTON ST
2-263
KEY WEST, FL 33040

Current Mailing Address:

1100 SIMONTON ST
KEY WEST, FL 33040

New Mailing Address:

1100 SIMONTON ST
2-263
KEY WEST, FL 33040

FEI Number: 65-0737532 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HASKELL, MONICA
2819 HARRIS AVENUE
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

WHARTON, DAVID
329 MARGARET STREET
#B
KEY WEST, FL 33040 US

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: DAVID WHARTON 08/01/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CD ( ) Delete
Name: GROTH, CONNIE
Address: 833 ELIZABETH ST
City-St-Zip: KEY WEST, FL 33040

Title: TD ( ) Delete
Name: HILDRETH, JACK
Address: 97665 OVERSEAS HWY
City-St-Zip: KEY LARGO, FL 33037

Title: VP ( ) Delete
Name: SANDIFER, CRIS
Address: 909 S. RUBY DR
City-St-Zip: KEY LARGO, FL 33037

Title: P ( ) Delete
Name: HASKELL, MONICA
Address: 2819 HARRIS AVE
City-St-Zip: KEY WEST, FL 33040

Title: SD ( ) Delete
Name: GRIFFEN, LOIS
Address: 2000 MANOR LANE
City-St-Zip: MARATHON, FL 33050

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change ( ) Addition
Name: WHARTON, DAVID
Address: 329 MARGARET #B
City-St-Zip: KEY WEST, FL 33040

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID WHARTON P 08/01/2007
Electronic Signature of Signing Officer or Director Date