

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734285

FILED
Feb 09, 2009
Secretary of State

Entity Name: THE POYNTER INSTITUTE FOR MEDIA STUDIES, INC.

Current Principal Place of Business:

C/O MONIQUE R. SAUNDERS
801 THIRD STREET SOUTH
ST. PETERSBURG, FL 33701 US

New Principal Place of Business:

Current Mailing Address:

C/O MONIQUE R. SAUNDERS
801 THIRD STREET SOUTH
ST. PETERSBURG, FL 33701 US

New Mailing Address:

FEI Number: 59-1630423

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THE POYNTER INSTITUTE FOR MEDIA STUDIES INC
801 THIRD STREET SOUTH
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: DUNLAP, KAREN BROWN DR.
Address: 801 THIRD STREET SOUTH
City-St-Zip: ST. PETERSBURG, FL 33701 US

Title: CT () Delete
Name: TASH, PAUL C
Address: 801 THIRD STREET SOUTH
City-St-Zip: ST. PETERSBURG, FL 33701 US

Title: TR () Delete
Name: JONES, JANA L
Address: 801 THIRD STREET SOUTH
City-St-Zip: ST. PETERSBURG, FL 33701 US

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:

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: KAREN BROWN DUNLAP

PT

02/09/2009

Electronic Signature of Signing Officer or Director

_____ Date