<u>REPORT</u> DOCUMENT# 702039				Jun 22, 2021 Secretary of State	
Entity Name	: MUSEUM OF FINE ARTS OF ST P	ETERSBURG, FLORID	DA, INC.	0467079386CC	
255 BEACH DR	ncipal Place of Business: NE BURG, FL 33701-0498				
Current Mai	ling Address:				
255 BEACH SAINT PETE	DR NE RSBURG, FL 33701-0498				
FEI Number: 59-0949278 Certificate of S				Status Desired: No	
Name and A	ddress of Current Registered Agen	it:			
SHEPHERD, KI 255 BEACH DR ST PETERSBU					
The above named	l entity submits this statement for the purpose of char	nging its registered office or regis	tered agent, or both, ir	n the State of Florida.	
SIGNATURE: KRISTEN A. SHEPHERD				06/22/2021	
	Electronic Signature of Registered Agent			Date	
Officer/Dire	ctor Detail :				
Title	CHAIRMAN	Title	PRESIDENT		
Name	CARLSON, DIMITY DR.	Name	SHEPHERD, KRI	STEN A.	
Address	255 BEACH DR NE	Address	255 BEACH DR N	IE	
City-State-Zip:	SAINT PETERSBURG FL 33701-0498	City-State-Zip:	SAINT PETERSB	URG FL 33701-0498	

2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

I hereby 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 all other like empowered.

PRESIDENT

06/22/2021

FILED

Electronic Signature of Signing Officer/Director Detail