

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 702039

**Entity Name:** MUSEUM OF FINE ARTS OF ST PETERSBURG, FLORIDA, INC.

**Current Principal Place of Business:**

255 BEACH DR NE  
SAINT PETERSBURG, FL 33701-0498

**Current Mailing Address:**

255 BEACH DR NE  
SAINT PETERSBURG, FL 33701-0498

**FEI Number: 59-0949278**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MILLS, HOWARD  
255 BEACH DRIVE N.E.  
ST PETERSBURG, FL 33701 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: HOWARD MILLS**

**04/30/2014**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	TD	Title	SD
Name	WELLS, HAROLD	Name	STAVROS, ELLEN
Address	255 BEACH DR. NE.	Address	255 BEACH DRIVE N.E.
City-State-Zip:	ST. PETERSBURG FL	City-State-Zip:	ST. PETERSBURG FL 33701

*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.*

**SIGNATURE: HAROLD WELLS**

**TREASURER**

**04/30/2014**

Electronic Signature of Signing Officer/Director Detail

Date