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. 07/12/2018

TREASURER

SIGNATURE: CATHY R. WOOD

Electronic Signature of Signing Officer/Director Detail

Name and Address of Current Registered Agent:

WOOD, CATHY R 150 W. UNIVERSITY BLVD MELBOURNE, FL 32901-6988 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:

Offi

Title	PRESIDENT	Title	TREASURER
Name	MCCAY, DWAYNE	Name	WOOD, CATHY R.
Address	150 W. UNIVERSITY BLVD	Address	150 W. UNIVERSITY BLVD
City-State-Zip:	MELBOURNE FL 32901-6988	City-State-Zip:	MELBOURNE FL 32901-6988

	Electronic Signature of Registered Agent			
cer/Director Detail :				
	PRESIDENT	Title	TREASURER	
е	MCCAY, DWAYNE	Name	WOOD, CATHY R.	
000		Addross		

DOCUMENT# 741921

Entity Name: FIT MUSEUM OF ART, INC.

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

150 W. UNIVERSITY BLVD MELBOURNE, FL 32901-6988

Current Mailing Address:

150 W. UNIVERSITY BLVD MELBOURNE, FL 32901-6988 US

FEI Number: 59-1804524

Certificate of Status Desired: Yes

Date

FILED Jul 12, 2018 Secretary of State CC7719667492

Date