## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 751233** 

Entity Name: ATLANTIC CENTER FOR THE ARTS, INC.

**Current Principal Place of Business:** 

1414 ART CENTER AVENUE NEW SMYRNA BEACH. FL 32168

**Current Mailing Address:** 

1414 ART CENTER AVENUE NEW SMYRNA BEACH, FL 32168

FEI Number: 59-1998321 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRESTON, WILLIAM 605 S ORANGE ST

NEW SMYRNA BEACH, FL 32168 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:

Electronic Signature of Registered Agent

Officer/Director Detail:

Title EXECUTIVE DIRECTOR Title TRUSTEE

Name MCINNES COOLIDGE, JENNIFER Name TEAGUE, ABBIE

MARIE

Address 1414 ART CENTER AVENUE Address 220 SOUTH RIDGEWOOD AVENUE

City-State-Zip: DAYTONA BEACH FL 32114

City-State-Zip: NEW SMYRNA BEACH FL 32168

Title CHAIRMAN Title TREASURER

Name NORTH, RUSSELL NAME DAVOLI, RON

Address 750 MONROE ROAD
Address 1215 COMMODORE DR.

City-State-Zip: SANFORD FL 32771
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title TRUSTEE

Name JERONIMO, JOHN Address 420 S. ORANGE AVE.

Address 901 SHEEPSHEAD AVENUE City-State-Zip: ORLANDO FL 32801

City-State-Zip: NEW SMYRNA BEACH FL 32169

Title VC

Title TRUSTEE Name BROWN, COREY

Name BECKWITH, MARK

Address 2340 CAPTAIN BUTLER TRAIL

Address 1208 PARALLAX ADVERTISING

City-State-Zip: NEW SMYRNA BEACH FL 32168

Continues on page 2

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: JENNIFER MCINNES COOLIDGE

**EXECUTIVE DIRECTOR** 

04/29/2024

FILED Apr 29, 2024

**Secretary of State** 

6892211181CC

Date

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

**TRUSTEE** Title Title **TRUSTEE** Name CASTRO, IVAN Name HARAN, KEVIN Address 1041 BUNGALOW AVE. Address 1081 ALPUG AVE. City-State-Zip: OVIEDO FL 32765 City-State-Zip: WINTER PARK FL 32789

Title **TRUSTEE** Title **TRUSTEE** 

Name KOSMAS, DAVID Name HESTER, LEE ROY Address 318 PALMETTO ST. Address 6107 FOX FIELD COURT

City-State-Zip: NEW SMYRNA BEACH FL 32168 City-State-Zip: WINDEMERE FL 34786

Title **TRUSTEE** Title TRUSTEE

MCGINNIS, DOUG Name Name MARTORANO, ANN

Address PO BOX 8 Address 6017 SANCTUARY GARDEN BLVD.

City-State-Zip: EDGEWATER FL 32132 City-State-Zip: PORT ORANGE FL 32128

Title **TRUSTEE** Title TRUSTEE

Name PABST STEINMETZ, MARGERY MOORE, JEFFREY Name

Address 321 W. READING WAY Address 12421 AQUARIUS AGORA DRIVE City-State-Zip: WINTER PARK FL 32789 City-State-Zip: ORLANDO FL 32816-1990

Title **TRUSTEE** Title **TRUSTEE** 

Name POWELL, HIRAM Name PENDERGAST, GERARD

Address 1661 PARADISE LANE Address 221 CANAL ST.

City-State-Zip: DAYTONA BEACH FL 32119 NEW SMYRNA BEACH FL 32168 City-State-Zip:

Title **TRUSTEE** Title TRUSTEE Name SINCLAIR, JO Name RAFFA, FRED

Address 10 MILTON ST. Address 45 EASTWIND LANE

City-State-Zip: ST. AUGUSTINE FL 32084 City-State-Zip: MAITLAND FL 32751

Title **TRUSTEE** Title **SECRETARY** Name

WOODS, NEKESIA Name TALLENT, NANCY

520 E. CHURCH STREET Address Address 1374 BRISTOL PARK PLACE City-State-Zip: ORLANDO FL 32801

HEATHROW FL 32746 City-State-Zip:

Title **TRUSTEE** Title TRUSTEE

COLLIER, KENNETH Name Name WILSON, MIDGE

Address 4493 S. ATLANTIC AVENUE Address 711 S. ATLANTIC AVENUE

City-State-Zip: NEW SMYRNA BEACH FL 32169

City-State-Zip: NEW SMYRNA BEACH FL 32169