

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 770161

**FILED**  
**Mar 09, 2016**  
**Secretary of State**  
**CC6985771082**

**Entity Name:** CULTURAL ARTS COALITION, INC.

**Current Principal Place of Business:**

321 N W 10TH ST  
GAINESVILLE, FL 32601

**Current Mailing Address:**

321 N W 10TH ST  
GAINESVILLE, FL 32601 US

**FEI Number:** 59-295251

**Certificate of Status Desired:** No

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

JAH, NKWANDA  
321 NW 10TH ST  
GAINESVILLE, FL 32601 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

Date

**Officer/Director Detail :**

Title PD  
Name BOWIE, MICHAEL DR.  
Address 4449 SW 21ST LANE  
City-State-Zip: GAINESVILLE FL 32607

Title TD  
Name GASTMEYER, ROBERTA  
Address 4118 NW 69TH ST  
City-State-Zip: GAINESVILLE FL 32606

Title SD  
Name MCPHERSON, DIANA ESQ.  
Address 706 NE 5TH AVE  
City-State-Zip: GAINESVILLE FL 32641

Title VPD  
Name JONES, TONY  
Address 7320 NW 47TH CT  
City-State-Zip: GAINESVILLE FL 32606

*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: ROBERTA GASTMEYER**

**TREASURER**

**03/09/2016**

Electronic Signature of Signing Officer/Director Detail

Date