

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004601

Entity Name: WINTER PARK SIDEWALK ART FESTIVAL FOUNDATION, INC.**FILED**
Jan 09, 2014
Secretary of State
CC8505486363**Current Principal Place of Business:**501 SOUTH NEW YORK AVENUE
SUITE 220
WINTER PARK, FL 32789**Current Mailing Address:**501 SOUTH NEW YORK AVENUE
SUITE 220
WINTER PARK, FL 32789 US**FEI Number:** 20-8786363**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DOWNING, HAROLD
501 SOUTH NEW YORK AVENUE
SUITE 220
WINTER PARK, FL 32789 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:** HAROLD DOWNING

01/09/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DP
Name	DOWNING, HAROLD L
Address	1943 SUNSET DR
City-State-Zip:	WINTER PARK FL 32789

Title	DV
Name	SACHA, THOMAS
Address	304 WING LANE
City-State-Zip:	WINTER PARK FL 32789

Title	DS
Name	MOULTON, ALICE
Address	PO BOX 1736
City-State-Zip:	WINTER PARK FL 32790

Title	DT
Name	WISLER, CAROL
Address	665 BALMORAL ROAD
City-State-Zip:	WINTER PARK FL 32789

Title	D
Name	ZARNOWIEC, SALLY
Address	1140 SOUTH ORLANDO AVENUE 810
City-State-Zip:	MAITLAND FL 32751

Title	D
Name	WECHSLER, MERCEDES
Address	545 DELANEY AVENUE BUILDING 6
City-State-Zip:	ORLANDO FL 32801

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 L. DOWNING**PRESIDENT**

01/09/2014

Electronic Signature of Signing Officer/Director Detail

Date