

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2005 8:00 am
Secretary of State

03-25-2005 90042 001 ****70.00

DOCUMENT # 700159

1. Entity Name
THE ST. AUGUSTINE ART ASSOCIATION



Principal Place of Business
**22 MAIN ST
ST. AUGUSTINE, FL 32084**

Mailing Address
**22 MAIN ST
ST. AUGUSTINE, FL 32084**

50030850



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03222005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-0719524

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WALER, RICHARD L., JR.
864 WHITE EAGLE CIRCLE
ST. AUGUSTINE, FL 32086**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **CABLE SPENCE, PRESIDENT**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete
NAME **RASEY, GERALDINE**
STREET ADDRESS **308 3RD ST.**
CITY-ST-ZIP **SAINT AUGUSTINE, FL 320841312**

TITLE **VPD** ☒ Delete
NAME **KRAUSZ, JEANNE**
STREET ADDRESS **16 MAY ST.**
CITY-ST-ZIP **SAINT AUGUSTINE, FL 320842139**

TITLE **S** ☒ Delete
NAME **DEPASQUALE, SHIRLEY**
STREET ADDRESS **5500 ATLANTIC VIEW**
CITY-ST-ZIP **ST. AUGUSTINE, FL 32084**

TITLE **T** ☒ Delete
NAME **WALER, RICHARD L.**
STREET ADDRESS **864 WHITE EAGLE CIRCLE**
CITY-ST-ZIP **ST. AUGUSTINE, FL**

TITLE **D** ☒ Delete
NAME **SPENCE, CABLE**
STREET ADDRESS **445 BAY POINT WAY N**
CITY-ST-ZIP **JACKSONVILLE, FL 322597908**

TITLE **D** ☒ Delete
NAME **PAHL, PAM**
STREET ADDRESS **342 CHARLOTTE ST.**
CITY-ST-ZIP **ST. AUGUSTINE, FL 32084**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Change ☐ Addition
NAME **SPENCE, CABLE**
STREET ADDRESS **445 BAY POINT WAY N.**
CITY-ST-ZIP **JACKSONVILLE, FL 32259**

TITLE **V** ☐ Change ☐ Addition
NAME **KRAUSZ, JEANNE**
STREET ADDRESS **16 MAY ST**
CITY-ST-ZIP **ST. AUGUSTINE, FL 32084**

TITLE **S** ☒ Change ☐ Addition
NAME **IRWIN, ROBERT**
STREET ADDRESS **398 MARSH PT. CIR.**
CITY-ST-ZIP **ST. AUGUSTINE, FL 32080**

TITLE **T** ☒ Change ☐ Addition
NAME **LOWE, JERALYN D.**
STREET ADDRESS **41 PEARLE BEACH CIR.**
CITY-ST-ZIP **FLAGLER BEACH, FL 32136**

TITLE **D** ☐ Change ☐ Addition
NAME **PAHL, PAM**
STREET ADDRESS **342 CHARLOTTE ST.**
CITY-ST-ZIP **ST. AUGUSTINE, FL 32084**

TITLE **D** ☒ Change ☐ Addition
NAME **GREEN, BILL**
STREET ADDRESS **1020 OAKRIDGE RD.**
CITY-ST-ZIP **ST. AUGUSTINE, FL 32086**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with or without being empowered.

SIGNATURE:

[Handwritten Signature]



ATTACHMENT

#700159

50030850

PG 2

ADDENDUM TO DOC #700159

D

WILLIS, JEAN LIGHT
27 ALCIRA CT.
ST. AUGUSTINE, FL 32086

D

LEVY, MICHAEL
616 WILD BIRD LANE
ST. AUGUSTINE, FL 32080

D

BURTIN, KAY
285 S. MATANZAS BLVD
ST. AUGUSTINE, FL 32080

D

BRADLEY, DIANE
144 CEDAR RIDGE CIR.
ST. AUGUSTINE, FL 32080

D

HOGAN, BOB
67 1/2 LEMON ST.
ST. AUGUSTINE, FL 32084

D

CERULLI, JILL
481 SAN NICHOLAS WAY
ST. AUGUSTINE, FL 32080