

2001 UNIFORM BUSINESS REPORT (UBR)

3/

FILED
Apr 10, 2001 8:00 am
Secretary of State

03-23-2001 90042 030 ****61.25

DOCUMENT # 701378

1. Entity Name

BEAUX ARTS OF MUSEUM OF ART, INC., FORT LAUDERDA

Principal Place of Business

**ONE EAST LAS OLAS BLVD.
FORT LAUDERDALE FL 33301**

Mailing Address

**ONE EAST LAS OLAS BLVD.
FORT LAUDERDALE FL 33301**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-6138952

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GLENEWINKEL, KATHRYN Y
2333 DESOTA DRIVE
FORT LAUDERDALE FL 33301**

7. Name and Address of New Registered Agent

Name **Holly Eakin Moody**

Street Address (P.O. Box Number is Not Accepted) **2900 E. Oakland PK Blvd**

City **Fort Lauderdale**

FL

Zip Code **33306**

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.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when reinstating)

3/20/2001

DATE

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE **VPD** ☒ Delete
NAME **HOLDEN, SUSAN**
STREET ADDRESS **1126 SE 7TH STREET**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

TITLE **TD** ☒ Delete
NAME **KOONTZ-KESIAN, MICHELE**
STREET ADDRESS **2310 NW 37TH WAY**
CITY-ST-ZIP **COCONUT CREEK FL 33066**

TITLE **ATD** ☒ Delete
NAME **MOODY, HOLLY**
STREET ADDRESS **2590 NE 43RD STREET**
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **President** ☒ Change ☐ Addition
NAME **Susan Holden**
STREET ADDRESS **1126 SE 7th Street**
CITY-ST-ZIP **Fort Lauderdale FL 33301**

TITLE **Vice President** ☒ Change ☐ Addition
NAME **Karyn Greep**
STREET ADDRESS **1933 NE 27th Street**
CITY-ST-ZIP **Fort Lauderdale, FL 33306**

TITLE **Treasurer** ☒ Change ☐ Addition
NAME **Holly Moody**
STREET ADDRESS **14 Winnemago Road**
CITY-ST-ZIP **Sea Ranch Lakes, FL 33306**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 all other like empowered.

SIGNATURE:

[Signature] **Treasurer**

3/20/2001 954506 7417

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)