# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Sep 05, 2000 8:00 am**
**Secretary of State**
09-05-2000 90025 001 ****61.25

DOCUMENT # 701597

1. Entity Name

ART CENTER OF COCOA VILLAGE, INC.

(R)

DO NOT WRITE IN THIS SPACE

| Principal Place of Business | Mailing Address |
|---|---|
| 425 BREVARD AVENUE<br>COCOA FL ~~32923-1274~~<br>US | ~~425 BREVARD AVENUE~~<br>COCOA FL ~~32923-1274~~<br>US |

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| | P.O. Box 1274 |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State: Cocoa, FL |
| Zip: 32922 / Country | Zip: 32923-1274 / Country: USA |

4. FEI Number: 23-7354704 ☐ Applied For ☐ Not Applicable

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 |
|---|---|
| JONES, GENIE<br>425 BREVARD AVENUE<br>COCOA FL 32923-1274 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW: FEE IS $61.25**
**After September 13, 2000 min. will be $236.25**

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 | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>JONES, GENIE<br>1321 HERITAGE ACRES BOULEVARD<br>ROCKLEDGE FL 32955 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D, P<br>Susan Vincent<br>1171 Grapefruit Rd., SE<br>Palm Bay, FL 32909 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>BERNARD, CLAUDINE<br>3747 TOMLIN DRIVE<br>COCOA FL 32926 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D, VP<br>Anita Bieske<br>1260 Island Dr.<br>Merritt Island, FL 32952 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>LAWRENCE, NATASHA<br>12 STONE STREET<br>COCOA FL 32922 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D, VP<br>Bill Dow<br>1283 Royal Birkdale Cir.<br>Rockledge, FL 32955 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>CATTANI, LOU<br>200 S. SYKES CREEK PARKWAY, #A-8<br>MERRITT ISLAND FL 32952 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D, S, T<br>Ruth Barnhart<br>6250 Capstan Ct.<br>Rockledge, FL 32955 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>BARNHART, RUTH<br>6250 CAPSTAN COURT<br>ROCKLEDGE FL 32955 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>Brenda Reece<br>275 Willow Ave.<br>Merritt Island, FL 32953 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |

CR2E037 (5/00)

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:** Susan Vincent ACQUIRES SUSAN VINCENT 8/10/00 321-956-7503
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #