## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 701967**

FILED Mar 20, 2009 Secretary of State

Entity Name: ARTS & DESIGN SOCIETY OF FORT WALTON BEACH, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

17 FIRST STREET S.E.

FORT WALTON BEACH, FL 32548 US

**Current Mailing Address: New Mailing Address:** 

17 FIRST STREET S.E.

FORT WALTON BEACH, FL 32548 US

FEI Number: 59-1657053 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MARCY, EADY A EXEC. D EADY, MARCY A EXEC. D 141 HOMEWOOD DR 141 HOMEWOOD DR

FT WALTON BEACH, FL 32548 US FT WALTON BEACH, FL 32548 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: MARCY EADY 03/20/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete SIMS, BERNADETTE PRESIDE JOHNSTON, ANN PRESIDE Name: Name: Address: 2832 JACK NICKLOUS WAY Address: 639 COUNTRY CLUB AVE SHALIMAR, FL 32579 US City-St-Zip: City-St-Zip: FT WALTON BCH, FL 32547 US

Title: () Delete Title: (X) Change ( ) Addition ARMSTRONG, MARLA V PRES Name: Name: GERSTMAN, FRAN V PRES

Address: 4235 OTTERLAKE COVE Address: 201 SLOAT CT SE

City-St-Zip: NICEVILLE, FL 32578 US City-St-Zip: FT WALTON BEACH, FL 32548 US

Title: () Delete Title: () Change () Addition BEHNKEN, URSEL TRES Name: Name:

Address: 111 CLIFFORD DR Address: City-St-Zip: SHALIMAR, FL 32579 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARCY EADY DIRE 03/20/2009