FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Feb 05, 2001 8:00 am **DOCUMENT # 702289 Secretary of State** THE DELAND MUSEUM OF ART, INC. 02-05-2001 90048 037 ****61.25 Principal Place of Business Mailing Address 600 N WOODLAND BLVD 600 N WOODLAND BLVD DELAND FL 32720-3447 DELAND FL 32720-3347 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-0678769 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) DANBERGER, DOROTHY 600 N WOODLAND BLVD DELAND FL 32720 City 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) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Addition TITLE ☐ Delete DASCHER, NANCY NAME NAME STREET ADDRESS STREET ADDRESS 3350 BLACK WILLOW RTR. CITY-ST-ZIP DELAND FL CITY-ST-ZIP SD Delete TITLE Addition TITLE Change HOWELL, HELEN NAME NAME Wayne Dreggors STREET AODRESS 3320 BUFFALO TRAIL STREET ADDRESS CITY-ST-ZIP DELAND FL CITY-ST-ZIP Change TITLE Detete TITLE alexander, mark Dr. Louis Brakeman 522 Princewood Dr. Deland, Fl 32724 NAME NAME STREET ADDRESS 600 N WOODLAND BLVD STREET ADDRESS CITY-ST-ZIP DELAND FL 32720 CITY-ST-ZIP Delete Addition TITLE TITLE Change Grenadette Samuel 1540 Rockwell Heights Dr. DeLand, FL 32724 NAME BAILEY, NANCEE NAME STREET ADDRESS 1155 COUNTY RD 4139 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DELAND FL 32724 TITLE Delete TITLE ☐ Change Addition RASCH, PAUL II NAME NAME Dorothy Dansberger 600 N. Woodland Blvd. STREET ADDRESS 730 INDEPENDENCE DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORANGE CITY FL 32763 DeLand, Fl 32720-3447 Addition TITLE TITLE Change)eiete NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Nancy Dascher OF SIGNING OFFICER OR DIRECTOR

2/2/01

Date

738-9530

Daytime Phone #