

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702289

FILED
Apr 29, 2004
Secretary of State

Entity Name: THE DELAND MUSEUM OF ART, INC.

Current Principal Place of Business:

600 N WOODLAND BLVD
DELAND, FL 327203447 US

New Principal Place of Business:

Current Mailing Address:

600 N WOODLAND BLVD
DELAND, FL 327203347 US

New Mailing Address:

FEI Number: 59-0678769

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOLIDGE, JENNIFER
600 N WOODLAND BLVD
DELAND, FL 32720

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TVP (X) Delete
Name: DE PARRY, ASTRID
Address: 113 LAKE WINNEMISSETT DR
City-St-Zip: DELAND, FL 32724

Title: V () Delete
Name: GEORGE, L
Address: PO BOX 2854
City-St-Zip: DE LAND, FL 32721

Title: S () Delete
Name: FRANK, MICHAEL
Address: 1890 SEMORAN BWD ST
City-St-Zip: WINTER PARK, FL 32792

Title: T () Delete
Name: SARKE, TEALE
Address: 2105 N WORDLAND BWD
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: COOLIDGE, JENNIFER
Address: 600 N WOODLAND BLVD
City-St-Zip: DELAND, FL 32720

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: GEORGE, LILIS
Address: PO BOX 2854
City-St-Zip: DE LAND, FL 32721

Title: P (X) Change () Addition
Name: FRONK, MICHAEL
Address: 1890 SEMORAN BWD ST
City-St-Zip: WINTER PARK, FL 32792

Title: T (X) Change () Addition
Name: PARKE, TEALE
Address: 2105 N WORDLAND BWD
City-St-Zip: DELAND, FL 32720

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S () Change (X) Addition
Name: ROLLINS, JACK
Address: 220 E. UNIVERSITY AVE.
City-St-Zip: DELAND, FL 32724

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JENNIFER COOLIDGE

D

04/29/2004

Electronic Signature of Signing Officer or Director

Date