

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90427 045 ****70.00

DOCUMENT # 705878 1. Entity Name SUNTAN ART CENTER, INC.					
Principal Place of Business 139 107TH AVE TREASURE ISLAND, FL 33706			Mailing Address 139 107TH AVE TREASURE ISLAND, FL 33706		
2. Principal Place of Business 3300 Gulf Blv Suite, Apt. #, etc.		3. Mailing Address 3300 Gulf Blv Suite, Apt. #, etc.			
City & State ST Petersburg Beach, FL Zip 33706		City & State ST Pete Beach, FL Zip 33706		4. FEI Number 23-7033821	
Country Pinellas		Country Pinellas		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required				04262006 Chg-NP CR2E037 (11/05)	
6. Name and Address of Current Registered Agent OWENS WAGNER, ETHEL 1100 55TH AVE N SAINT PETERSBURG, FL 33703			7. Name and Address of New Registered Agent Name Libit Jones Street Address (P.O. Box Number is Not Acceptable) 3500-12th Ave N City St Petersburg FL Zip Code 33713		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u><i>Ethel Owens Wagner</i></u> <u><i>Libit Jones</i></u> <u><i>4/26/06</i></u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PVPD TEASLEY, JEAN 1630 A ROYAL PALM DR GULFPORT, FL 33707	☒ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P JONES, LIBIT 3500 12TH AVENUE N SAINT PETERSBURG, FL 33713	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD OWEN WAGNER, ETHEL 1100 55TH AVE N SAINT PETERSBURG, FL 33703	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Sc DANSON, TERRY 6300 20TH ST S SAINT PETERSBURG, FL 33712	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u><i>Ethel Owens Wagner</i></u> <u><i>Treasurer</i></u> <u><i>4/26/06</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					