## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

ONE E LAS OLAS BLVD



Jan 13, 2003 8:00 am Secretary of State 01-13-2003 90053 047 \*\*\*\*61.25

FILED

DOCUMENT #  D. Entity Name  MUSEUM OF ART, INC.		
Principal Place of Business	Mailing Address	

FT LAUDERDALE FL 33301 FT LAUDERDALE FL 33301 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

ONE E LAS OLAS BLVD



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-6033555 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required

-6. Name and Address of Current Registered Agent

GARDNER, R M **GUNSTER, YOAKLEY, ET AL** 500 E. BROWARD BLVD., #1400 FT. LAUDERDALE FL 33394

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
Cit.

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Delete TITLE TITLE ☐ Change X Addition RICHARD JACOBSON SMITH, JEAN G NAME NAME 2700 S. COMMERCE PKWY, \* 300 STREET ADDRESS 501 E. LAS OLAS BLVD. STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33301 WESTON, FL 33331 CITY-ST-ZIP SD TITLE ☐ Delete TITLE Change ☐ Addition **BUNNELL, GEORGE** NAME NAME 888 E LAS OLAS BLVD #400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP -FORT LAUDERDALE FL 33301 CITY-ST-ZIP vpd TITLE ☐ Delete TITLE Change ■ Addition MCDANIEL, ANNA NAME NAME 2731 MAYAN DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL 33316 TITLE ☐ Delete TITI F ☐ Change ☐ Addition DILL. LOUISE NAME NAME STREET ADDRESS 1100 E LAS OLAS BLVD STREET ADDRESS CITY-ST-7IP FT.LAUDERDALE FL 33301 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition GRANSON, ROBERT NAME STREET ADDRESS ONE EAST LAS OLAS BLVD. STREET ADDRESS CITY-\$T-ZIP CITY-ST-ZIP FORT LAUDERDALE FL 33301 **VPD** ☐ Delete TITLE ☐ Change ☐ Addition HILKER, DONALD NAME STREET ADDRESS 77 S BIRCH RD APT 3-C STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33316 CITY-ST-ZIP

12. Thereby 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:

1/6/03

954-525-5500