2000 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 04, 2000 8:00 am Secretary of State DOCUMENT # 706206 . ORMOND MEMORIAL ART MUSEUM, INC. 03-04-2000 90001 040 ****61.25 Mailing Address Principal Place of Business 78 EAST GRANADA BOULEVARD 78 EAST GRANADA BOULEVARD ORMOND BEACH FL 32176-6534 PAATALAT ORMOND BEACH FL 32176 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-6152272 Not Applicable Zip \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) LENSSEN, WILL 78 EAST GRANADA BLVD ORMOND BEACH FL 32176 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: Trust Fund Contribution. **Department of State** Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Addition TITLE ☐ Change TITLE ☐ Delete NAME LENSSEN, WILL NAME STREET ADDRESS STREET ADDRESS 78 E GRANADA BLVD CITY-ST-ZIP CITY-ST-ZIP ORMOND BEACH FL 32176 Delete TITLE K Change ☐ Addition VD TITLE VD YOUNG, BARBARA NAME NAME Susie Keough STREET ADDRESS STREET ADDRESS 78 EAST GRANADA BLVD. 78 East Granada Blvd. CITY-ST-ZIP CITY-ST-7IP ORMOND BEACH FL 32176 SD Change - Addition TITLE -SD Delete TITLE NAME Beth Ofseur KEOUGH, SUSIE NAME STREET ADDRESS 78 East Granada Blvd. STREET ADDRESS 78 EAST GRANADA BLVD CITY-ST-7IP CITY-ST-ZIP ORMOND BEACH FL 32176 ☐ Change ☐ Addition TITLE Delete SD NAME ROSSMEYER, SANDY NAME STREET ADDRESS STREET ADDRESS 78 EAST GRANADA BLVD CITY-ST-ZIP CITY-\$T-ZIP **ORMOND BEACH FL 32176** ☐ Change □ Addition □ Delete TITLE OF'SEUR, BETH NAME Judy Monaco STREET ADDRESS STREET ADDRESS 78 EAST GRANADA BLVD 78 East Granada Blvd. CITY-ST-ZIP CITY-ST-ZIP ORMOND BEACH FL 32176 ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

SIGNATURE AND TYPED OR F

changed, or on an attachment with an address, with all other like empowered.