

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 17, 2004 8:00 am
Secretary of State

02-17-2004 90040 021 ****61.25

DOCUMENT # 706206

1. Entity Name

ORMOND MEMORIAL ART MUSEUM, INC.



Principal Place of Business

78 EAST GRANADA BOULEVARD
ORMOND BEACH FL 32176

Mailing Address

78 EAST GRANADA BOULEVARD
ORMOND BEACH FL 32176

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-6152272

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

OFSEUR, BETH
78 EAST GRANADA BLVD
ORMOND BEACH FL 32176

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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. 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)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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

TITLE PD
NAME OFSEUR, BETH ☒ Delete
STREET ADDRESS 78 E GRANADA BLVD
CITY-ST-ZIP ORMOND BEACH FL 32176

TITLE VD
NAME ARTIN, GAIL ☒ Delete
STREET ADDRESS 78 EAST GRANADA BLVD.
CITY-ST-ZIP ORMOND BEACH FL 32176

TITLE SD
NAME SNELL, JORI ☒ Delete
STREET ADDRESS 78 EAST GRANADA BLVD
CITY-ST-ZIP ORMOND BEACH FL 32176

TITLE SD ☒ Delete
NAME REMEY, DEE
STREET ADDRESS 78 EAST GRANADA BLVD
CITY-ST-ZIP ORMOND BEACH FL 32176

TITLE TD
NAME CLOAK, CLARENCE ☐ Delete
STREET ADDRESS 78 E GRANADA BLVD
CITY-ST-ZIP ORMOND BEACH FL 32176

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME Judy Monaco
STREET ADDRESS 78 E. Granada Blvd
CITY-ST-ZIP Ormond Beach 32176

TITLE VD ☒ Change ☐ Addition
NAME Shaun Anderson
STREET ADDRESS 78 E. Granada Blvd.
CITY-ST-ZIP Ormond Beach 32176

TITLE SD ☒ Change ☐ Addition
NAME SD Stephanie Edwards
STREET ADDRESS 78 E. Granada Blvd
CITY-ST-ZIP Ormond Beach 32176

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #