2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707990

FILED May 05, 2009 Secretary of State

	e: ARTS CENTER ASSOCIATION, INC.	
Current Pr	incipal Place of Business:	New Principal Place of Business:
719 CENTR ST. PETER	RAL AVE SBURG, FL 33701 US	
Current Ma	niling Address:	New Mailing Address:
719 CENTF ST. PETER	RAL AVE SBURG, FL 33701 US	
	e with s. 607.193(2)(b), F.S., the corporation did not receive	-
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:
	ELYN R RAL AVENUE ERSBURG, FL 33701 US	TULLY, MERRI K 719 CENTRAL AVENUE SAINT PETERSBURG, FL 33701 US
The above in the State	named entity submits this statement for the purpose of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE: MERRI K TULLY		05/05/2009
	Electronic Signature of Registered Agent	Date
OFFICERS	AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title:		
Name: Address: City-St-Zip:	C () Delete BRETT, TERRY 425 15TH AVE NE SAINT PETERSBURG, FL 33704	Title: () Change () Addition Name: Address: City-St-Zip:
Address:	BRETT, TERRY 425 15TH AVE NE	Name: Address:
Address: City-St-Zip: Title: Name: Address:	BRETT, TERRY 425 15TH AVE NE SAINT PETERSBURG, FL 33704 S () Delete WEBB, DAR 405 CENTRAL AVE #250	Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	BRETT, TERRY 425 15TH AVE NE SAINT PETERSBURG, FL 33704 S () Delete WEBB, DAR 405 CENTRAL AVE #250 SAINT PETERSBURG, FL 33701 T () Delete JOHLER, LYNN P.O. BOX 422	Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: T (X) Change () Addition Name: JONES, JEFF Address: 200 COFFEE POT RIVERIA NE

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MERRI K TULLY Ρ 05/05/2009