


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 09, 2007 8:00 am
Secretary of State

08-09-2007 90054 037 ****61.25

DOCUMENT # 708433 1. Entity Name FLORIDA ARTISTS GROUP, INC.			
Principal Place of Business 6607 BLUE HERON DRIVE SAINT PETERSBURG, FL 33707 US		Mailing Address 6607 BLUE HERON DRIVE SAINT PETERSBURG, FL 33707 US	
2. Principal Place of Business - No P.O. Box # 830 Franklin Road Suite, Apt. #, etc. West Palm Beach, FL City & State		3. Mailing Address 830 Franklin Road Suite, Apt. #, etc. West Palm Beach, FL City & State	
Zip 33405-4210	Country Palm Beach	Zip 33405-4210	Country Palm Beach
4. FEI Number NOT APPLICABLE		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HANGEN, CECILY 830 FRANKLIN RD WEST PALM BEACH, FL 33405		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting)</small>			
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	PD NOVAK, JOYCE 1066 TRUMAN ST NOKOMIS, FL 34275	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President AHLIN D 1620 Mohawk Trail Maitland, FL 32751
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GORDON-HARRIS, CASSANDRA 2000 28TH AVE N SAINT PETERSBURG, FL 33713	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Barre Barrett D 2601 South Second Street Jacksonville Beach, FL 32250
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HANGEN, CECILY 830 FRANKLIN RD WEST PALM BEACH, FL 33405	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Cecily Hangen D 830 Franklin Road West Palm Beach, FL 33405
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GRIFFIN, NANCY 6607 BLUE HERON DR S SAINT PETERSBURG, FL 33707	TITLE NAME STREET ADDRESS CITY-ST-ZIP	no longer applies
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____	TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____	TITLE NAME STREET ADDRESS CITY-ST-ZIP	_____ _____ _____
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>Cecily Hangen</u> Cecily Hangen 8/6/07 (561) 332-1717 (4-4)			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			