

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90292 024 ****61.25

DOCUMENT # 715900

1. Entity Name

THE ARTS COUNCIL OF NORTHWEST FLORIDA, INC.

Principal Place of Business

226 S. PALAFOX
 2ND FLOOR
 PENSACOLA FL 32501
 US

Mailing Address

P.O. BOX 731
 PENSACOLA FL 32594
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7022185

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

LORREN, LONNIE D
 324 S ALCANIZ
 PENSACOLA FL 32501

7. Name and Address of New Registered Agent

Name

Andrew Witt

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

226 S. Palafox Ste, Ste 204

City

Pensacola

FL

Zip Code
 32501

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/27/01

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
 NAME COBLE, H F
 STREET ADDRESS 406 W LLOYD
 CITY-ST-ZIP PENSACOLA FL 32501 ☒ Delete

TITLE PD
 NAME Wendy Markey-Steres
 STREET ADDRESS 19 W. Garden ST
 CITY-ST-ZIP Pensacola, FL 32501 ☒ Change ☐ Addition

TITLE DT
 NAME BEAR, DAVID
 STREET ADDRESS 1850 W HALLEY AVE
 CITY-ST-ZIP PENSACOLA FL 32503 ☐ Delete

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

TITLE DS
 NAME MCKINNEY, REX
 STREET ADDRESS 4225 ROMMITCH LANE
 CITY-ST-ZIP PENSACOLA FL 32504 ☒ Delete

TITLE DS
 NAME Suzanne Shackley
 STREET ADDRESS 375 Wiscogee Rd
 CITY-ST-ZIP Cantonment, FL 32533 ☒ Change ☐ Addition

TITLE M
 NAME WITT, ANDREW
 STREET ADDRESS 1407 LEMHURST DR
 CITY-ST-ZIP PENSACOLA FL ☐ Delete

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

TITLE M
 NAME METZGER, ANDREW
 STREET ADDRESS 3547 FIRESTONE BLVD.
 CITY-ST-ZIP PENSACOLA FL ☒ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE DT
 NAME Wayne Williams
 STREET ADDRESS 947 Gaudelier Blvd
 CITY-ST-ZIP Gulf Breeze, FL 32561 ☐ Change ☒ Addition

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:

Wendy Markey-Steres

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)