2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 08, 2007 8:00 am Secretary of State

1. Entity Nam	MENT #722119 ELAND ART GUILD, INC.					03-08-20	007 90005		
Principal Place of Business 707 E. LEMON ST. PO BOX 353 LAKELAND, FL 33802		Mailing Address PO BOX 353 LAKELAND, FL 33802 US							
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03052007	Chg-NP	CR2E	37 (12/06)	
City & State		City & State			4. FEI Numbe 23-715	5792		No	plied For Applicable
Zip	Country	Zip	Country			of Status Desire		\$8.75 Add	litional d
8. Name and Address of Current Registered Agent					7. Name and	Address of Ne	w Registered	Agent	
JOHNSON, VICTORIA L 210 VICTOR RD LAKELAND, FL 33809			Street	Address (F	A MCALLISTER LINDA M. Pess (P.O. Box Number is Not Acceptable) ACHET BLVP.				
			Cily	AKELAND FL Zip Code 33813					
the obligat	named entity submits this statement to ions of registered agent.	or the purpose of changing its re				n, in the State o			
SIGNATURE	Signature, typed or punted name of legistrated agent	and title if applicable. (NOTE: F	Registered Agent sign	sture required	when reinstating)		DATE		
SIGNATURE	Signature, typed or printed name of legistred agent Filling Fee is \$61.25 Due by May 1, 2007	and little if applicable. (NOTE: F 9. Election Camp Trust Fund Co	Registered Agent eight Daign Financing	sture required	\$5.00 May B Added to Fees	•	DATE	k payable t	0
SIGNATURE	Filing Fee is \$61.25	9. Election Camp Trust Fund Co	Registered Agent eight Daign Financing	sture required	\$5.00 May B	•	Make chec	k payable to	o tate
10. HTLE	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DI	9. Election Camp Trust Fund Co	paign Financing ntribution.	sture required	\$5.00 May B Added to Fees	•	Make chec	k payable to	o tate
10. HILE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DI ED JOHNSON, VICTORIA L 210 VICTOR RD	9. Election Camp Trust Fund Co	agistered Agent eignication. 11. TITLE NAME STREET ADDRESS	sture required	\$5.00 May B Added to Fees	•	Make chec	ck payable to	tate
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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.