2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729244

Entity Name: FLORIDA WATERCOLOR SOCIETY, INC.

FILED Mar 02, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4624 HARBOUR VILLAGE BLVD 4624 HARBOUR VILLAGE BLVD

4501 4501

PORT INLET, FL 32127 PONCE INLET, FL 32127

Current Mailing Address: New Mailing Address:

4624 HARBOUR VILLAGE BLVD 4624 HARBOUR VILLAGE BLVD

4501 PORT INLET, FL 32127 PONCE INLET, FL 32127

US

FEI Number: 23-7410596 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROBINSON, LAURA ROBINSON, LAURA B

4624 HARBOUR VILLAGE BLVD#4501 4624 HARBOUR VILLAGE BLVD, #4501

PONCE INLET, FL 32127 PORT INLET, FL 32127

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: LAURA B ROBINSON 03/02/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

ABGOTT, ANNE REYNOLDS, SUE Name: Name: 3840 MANNERS WAY Address: 207 DUNE CIRCLE Address:

City-St-Zip: CORTEZ, FL 34215 City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: 1VPD () Delete Title: (X) Change () Addition REYNOLDS, SUE Name: DE BROEKERT, GARY Name:

Address: 207 DUNE CIRCLE Address: 1177 86TH TERRACE NORTH City-St-Zip: NEW SMYRNA BEACH, FL 32169 City-St-Zip: ST. PETERSBURG, FL 33702

Title: 2VPD () Delete Title: 1V/D (X) Change () Addition DEIR, TERESA KIRK, TERESA Name: Name:

16935 NW 20TH ST Address: Address: 16935 NW 20TH STREET City-St-Zip: HOLLYWOOD, FL 33028 City-St-Zip: PEMBROKE PINES, FL 33028

Title: CSD () Delete Title: 2V/D (X) Change () Addition

BOSTWICK, KATHY Name: DREWRY, ANNE Name: 5210 PINE ROCKLANDS AVE Address: Address: 2711 W. MARION AVE City-St-Zip: LITHIA, FL 33547 City-St-Zip: PUNTA GORDA, FL 33950

Title: () Delete Title: (X) Change () Addition

ROBINSON, LAURA ROBINSON, LAURA B Name: Name:

4624 HARBOUR VILLAGE BLVD 4624 HARBOUR VILLAGE BLVD Address: Address:

City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: PONCE INLET, FL 32127

Title: () Delete Title: (X) Change () Addition DREWRY, ANNE HODGES, KAREN Name: Name:

Address: P.O. BOX 398 Address: 5210 PINE ROCKLANDS AVE

REYNOLDS, GA 31076 City-St-Zip: LITHIA, FL 33547 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LAURA B ROBINSON T/D 03/02/2007

Electronic Signature of Signing Officer or Director

Date