

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735376

FILED  
Mar 28, 2006  
Secretary of State

Entity Name: MUSEUM STORE ASSOCIATION, INC.

## Current Principal Place of Business:

4100 E MISSISSIPPI AVE  
800  
DENVER, CO 80246 US

## New Principal Place of Business:

## Current Mailing Address:

4100 E MISSISSIPPI AVE  
800  
DENVER, CO 80246 US

## New Mailing Address:

FEI Number: 52-6044269

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DUCKWORTH, HOBBY & ALLEN, P.A.  
1300 NORTH MILLS AVENUE  
ORLANDO, FL 32803 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MCCOMB, ROBERT  
Address: 811 S PALM AVE  
City-St-Zip: SARASOTA, FL 34236

Title: VPD ( ) Delete  
Name: MURPHY, LAURA  
Address: 424 BELLEVUE AVE  
City-St-Zip: NEWPORT, RI 02840 69

Title: TD ( ) Delete  
Name: CHAPIN, LAUREN  
Address: 4155 LINNEAN AVE NW  
City-St-Zip: WASHINGTON, DC 20008

Title: SD ( ) Delete  
Name: MOREHEAD, JENNIFER  
Address: 2500 W BROAD ST  
City-St-Zip: RICHMOND, VA 23220

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MURPHY, LAURA  
Address: 424 BELLVUE AVE  
City-St-Zip: NEWPORT, RI 02840

Title: VPD (X) Change ( ) Addition  
Name: STUTZ, SALLIE  
Address: 200 EASTERN PARKWAY  
City-St-Zip: BROOKLYN, NY 11238

Title: TD (X) Change ( ) Addition  
Name: NAPOLI, MARIE  
Address: 767 CLIFTON RD NE  
City-St-Zip: ATLANTA, GA 30307

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: BEVERLY J BARSOOK

ED

03/28/2006

Electronic Signature of Signing Officer or Director

Date