

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 735376

**FILED**  
**Jan 07, 2010**  
**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  
Name: DEVINE, META  
Address: 345 KELLOGG BLVD W  
City-St-Zip: MINNEAPOLIS, MN 55102

Title: VPD  
Name: HARTMAN, LESLIE  
Address: 22611 STATE RT 2  
City-St-Zip: ARCHBOLD, OH 43502

Title: TD  
Name: TARNOW, TERRY  
Address: 1701 E FRONT ST  
City-St-Zip: TRAVERSE CITY, MI 49686

Title: SD  
Name: RICKER, BETH  
Address: 1801 MOUNTAIN RD NW  
City-St-Zip: ALBUQUERQUE, NM 87104

I hereby 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 all other like empowered.

SIGNATURE: BEVERLY BARSOOK

DIRE

01/07/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date