

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

APPROVED
AND
FILED

97 NOV 12 AM 11:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 737144 (6)
1. Corporation Name
FLORIDA ART EDUCATION ASSOCIATION, INCORPORATED



Principal Place of Business Mailing Address
8128 25TH AVENUE NORTH P. O. BOX 11478
ST. PETERSBURG FL 33710-3630 ST PETE FL 33733-1478
US US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 952 Francis St.		26 P. O. Box 6038		10/26/1976		07/25/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22 West Palm Beach		27 West Palm Beach		51-0182663		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23 Florida		28 Florida		6. Election Campaign Financing		<input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Zip		Trust Fund Contribution		<input type="checkbox"/>	
24 33405		29 33405		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Country		Country					
25 U.S.		30 U.S.					

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NURMELA, RALPH M
8128 25TH AVENUE NORTH
ST. PETERSBURG FL 33710

81 Name Pearl Krepps
82 Street Address (P.O. Box Number is Not Acceptable) 952 Francis Street
83 West Palm Beach
84 City West Palm Beach FL 85 Zip Code 33405

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE Pearl Krepps, Treasurer
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating)

11-5-97
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	ED	1.1 TITLE	D
NAME	NURMELA, RALPH M	1.2 NAME	Nancy Ingle-Krebsbach
STREET ADDRESS	8128 25TH AVENUE NORTH	1.3 STREET ADDRESS	858 Park Lake Court
CITY-ST-ZIP	ST. PETERSBURG FL	1.4 CITY-ST-ZIP	Orlando, Florida 32803-3908
TITLE	P	2.1 TITLE	
NAME	AZCUY, RAY T	2.2 NAME	500002346665--4
STREET ADDRESS	185 NW 164TH AVENUE	2.3 STREET ADDRESS	-11/13/97--01080--006
CITY-ST-ZIP	PEMBROKE PINES FL	2.4 CITY-ST-ZIP	*****61.25 *****61.25
TITLE	SD	3.1 TITLE	
NAME	MILES, PATRICIA A	3.2 NAME	
STREET ADDRESS	1427 HARNDEN ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	PORT ORANGE FL	3.4 CITY-ST-ZIP	
TITLE	TD	4.1 TITLE	
NAME	KREPPS, PEARL	4.2 NAME	
STREET ADDRESS	952 FRANCIS STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BCH. FL	4.4 CITY-ST-ZIP	
TITLE	S	5.1 TITLE	
NAME	WILLIAMS, MAU NAN	5.2 NAME	
STREET ADDRESS	385 GROUSE COURT	5.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE Pearl Krepps, Treasurer
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating)

CR2E037 (4/97)

To: Whom It Might Concern
From: Pearl Krepps, Treasurer
Florida Art Education Assn.
Date: November 5, 1997
Subject: Nonprofit Corporation Annual Report

On June 18, 1997, I mailed the nonprofit corporation annual report for the Florida Art Education Association and included a check for \$61.25. I did not get a cancelled check back in the next bank statement so I called (Andy) regarding the check. Andy informed me that your office had received the application but it had been returned for another signature on line 11. He said it had been returned to:

Pearl Krepps
P.O. Box 11478
West Palm Beach, Florida 33405

At that time I told him that the address was wrong. Your office sent it to a St. Pete Post Office box number in West Palm Beach. I requested that when the letter was returned to your office that it be resent to the correct address. The correct address is listed under number 2 and again under number 10. To date I have not received any correspondence until yesterday. Upon calling again, the girl who answered the phone suggested that I write a letter and reissue the check.

Enclosed is a copy of the original document that was filed in June and a second notice along with a check. Please send all future correspondence to either 952 Francis Street or P.O. Box 6038, West Palm Beach, Florida 33405. The organization is no longer using either St. Petersburg address.

Thank you. Should you need further information, please call me at my work number (561) 434-8161.