

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 12, 2007 8:00 am
Secretary of State

06-12-2007 90111 043 ****70.00

DOCUMENT # 739540					
1. Entity Name BEAUX ARTS ASSOCIATES OF MUSEUM ART, INC., FORT LAUDERDALE, FLORIDA					
Principal Place of Business ONE EAST LAS OLAS BLVD. FT. LAUDERDALE, FL 33301			Mailing Address ONE E. LAS OLAS BLVD. ATTN: SEN. DEBBY SANDERSON FORT LAUDERDALE, FL 33301		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc. <i>ATTN: Susan Holden</i>			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CAMP, MELANIE 2841 N.E. 21ST COURT FORT LAUDERDALE, FL 33305			Name <i>Susan Holden</i> Street Address (P.O. Box Number is Not Acceptable) <i>1126 SE 7 Street</i> City <i>Fort Lauderdale</i> FL Zip Code <i>33301</i>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <i>Susan Holden</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>			DATE <i>5-17-07</i> <small>(NOTE: Registered Agent signature required when reconstituting)</small>		
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CAMP, MELANIE 2841 NE 21ST COURT FORT LAUDERDALE, FL 33305				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP HEWITT, DONNA 1637 SE 14 STREET FORT LAUDERDALE, FL 33316				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SCHECTER, KAREN 52 CAYUGA RD. SEA RANCH LAKES, FL 33308				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T SANDERSON, DEBBY 4800 NE 20 TERR., STE. 401 FORT LAUDERDALE, FL 33308				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	(Empty row)				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	(Empty row)				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Eileen Lank 2733 NE 37 Drive Fort Lauderdale, FL 33308				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Jean Davis 804 Cypress Blvd #505 Pompano Beach, FL 33069				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Kari MacDonald 4401 NE 25 AVE Fort Lauderdale, FL 33308				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T Susan Holden 1126 SE 7 Street Fort Lauderdale, FL 33301				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	(Empty row)				
TITLE NAME STREET ADDRESS CITY - ST - ZIP	(Empty row)				
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.					
SIGNATURE: <i>Susan Holden</i> Susan Holden 5-17-07 954-765-1915					

40120508



05172007 Chg-NP CR2E037 (12/06)

4. FEI Number
NOT APPLICABLE

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent
 Name *Susan Holden*
 Street Address (P.O. Box Number is Not Acceptable)
1126 SE 7 Street
 City *Fort Lauderdale* **FL** Zip Code *33301*

8. 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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE *Susan Holden* DATE *5-17-07*

Filing Fee is \$61.25 Due by September 14, 2007

9. Election Campaign Financing
 Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CAMP, MELANIE 2841 NE 21ST COURT FORT LAUDERDALE, FL 33305	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Eileen Lank 2733 NE 37 Drive Fort Lauderdale, FL 33308
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP HEWITT, DONNA 1637 SE 14 STREET FORT LAUDERDALE, FL 33316	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Jean Davis 804 Cypress Blvd #505 Pompano Beach, FL 33069
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S SCHECTER, KAREN 52 CAYUGA RD. SEA RANCH LAKES, FL 33308	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Kari MacDonald 4401 NE 25 AVE Fort Lauderdale, FL 33308
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T SANDERSON, DEBBY 4800 NE 20 TERR., STE. 401 FORT LAUDERDALE, FL 33308	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T Susan Holden 1126 SE 7 Street Fort Lauderdale, FL 33301
TITLE NAME STREET ADDRESS CITY - ST - ZIP	(Empty row)	TITLE NAME STREET ADDRESS CITY - ST - ZIP	(Empty row)
TITLE NAME STREET ADDRESS CITY - ST - ZIP	(Empty row)	TITLE NAME STREET ADDRESS CITY - ST - ZIP	(Empty row)

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.

SIGNATURE: *Susan Holden* Susan Holden 5-17-07 954-765-1915