

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739540

FILED
Jun 29, 2009
Secretary of State

Entity Name: BEAUX ARTS ASSOCIATES OF MUSEUM ART, INC., FORT LAUDERDALE, FLORIDA

Current Principal Place of Business:

ONE EAST LAS OLAS BLVD.
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

Current Mailing Address:

ONE E. LAS OLAS BLVD.
ATTN: SUSAN HOLDEN
FORT LAUDERDALE, FL 33301

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FREI, CAROL C
39 CASTLE HARBOR ISLE
FORT LAUDERDALE, FL 33308 US

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: VP () Delete
Name: MOON, ANN M
Address: 1650 SE 8TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: S () Delete
Name: TOLLE, EMILY
Address: 2501 NE 12TH COURT
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: T () Delete
Name: FREI, CAROL C
Address: 39 CASTLE HARBOR ISLE
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: P () Delete
Name: HOLDEN, SUSAN
Address: 1126 SE 7 STREET
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CAROL C. FREI

MRS.

06/29/2009

Electronic Signature of Signing Officer or Director

Date