

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752196

FILED
Apr 10, 2009
Secretary of State

Entity Name: THE ARTS COUNCIL, INC.

Current Principal Place of Business:

80 E. OCEAN BLVD.
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

80 E. OCEAN BLVD.
STUART, FL 34994

New Mailing Address:

FEI Number: 59-2015691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATERS, JENNIFER
3473 SE WILLOUGHBY BLVD.
STUART, FL 34994 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: SED () Delete
Name: TURRELL, NANCY K
Address: 80 E OCEAN BLVD
City-St-Zip: STUART, FL 34994

Title: CD () Delete
Name: YARDLEY, VICTORIA
Address: 5248 SW ANHINGA AVENUE
City-St-Zip: PALM CITY, FL 34990

Title: VD () Delete
Name: MUELLER, JEANETTE
Address: 2002 SW RACQUET CLUB DRIVE
City-St-Zip: PALM CITY, FL 34990

Title: TD () Delete
Name: LEWIS, SEAN
Address: 500 E OCEAN BLVD
City-St-Zip: STUART, FL 34994

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ED (X) Change () Addition
Name: TURRELL, NANCY K
Address: 80 E OCEAN BLVD
City-St-Zip: STUART, FL 34994

Title: PD (X) Change () Addition
Name: YARDLEY, VICTORIA
Address: 5248 SW ANHINGA AVENUE
City-St-Zip: PALM CITY, FL 34990

Title: CD (X) Change () Addition
Name: MUELLER, JEANETTE
Address: 2002 SW RACQUET CLUB DRIVE
City-St-Zip: PALM CITY, FL 34990

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

Title: SD () Change (X) Addition
Name: SCHOONOVER, NICKI
Address: PO BOX 1375
City-St-Zip: PALM CITY, FL 34991

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: NANCY K TURRELL

ED

04/10/2009

Electronic Signature of Signing Officer or Director

Date