

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753489

FILED
Jan 05, 2012
Secretary of State

Entity Name: SALVADOR DALI MUSEUM, INC.

Current Principal Place of Business:

ONE DALI BOULEVARD
ST. PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

ONE DALI BOULEVARD
ST. PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 59-2015192

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, JAMES W
100 SECOND AVENUE SOUTH
SUITE 102N
ST. PETERSBURG, FL 33701 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: DP
Name: JAMES, THOMAS A
Address: ONE DALI BOULEVARD
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: DT
Name: CORTY, ANDREW P
Address: ONE DALI BOULEVARD
City-St-Zip: ST. PETERSBURG, FL 33701

Title: DVP
Name: MORSE, BRAD G
Address: ONE DALI BOULEVARD
City-St-Zip: ST. PETERSBURG, FL 33701

Title: DAS
Name: ULRICH, ROBERT L
Address: ONE DALI BOULEVARD
City-St-Zip: ST. PETERSBURG, FL 33701

Title: DAT
Name: HOUGH, WILLIAM R
Address: ONE DALI BOULEVARD
City-St-Zip: ST. PETERSBURG, FL 33701

Title: DS
Name: MARTIN, JAMES W
Address: 100 SECOND AVE. S #102N
City-St-Zip: ST. PETERSBURG, FL 33701

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: JAMES W. MARTIN

SECY

01/05/2012

Electronic Signature of Signing Officer or Director

Date