

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765245

FILED
Jan 07, 2009
Secretary of State

Entity Name: ARTS COUNCIL OF VOLUSIA COUNTY, INC.

Current Principal Place of Business:

900 SMOKE ISL BLVD
PORT ORANGE, FL 32127 US

New Principal Place of Business:

900 SMOKERISE BLVD
PORT ORANGE, FL 32127 US

Current Mailing Address:

P.O. BOX 290850
PORT ORANGE, FL 32129 US

New Mailing Address:

FEI Number: 59-2245895 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASON, HENRY T
900 SMOKERISE BLVD.
PORT ORANGE, FL 32127 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: SD () Delete
Name: FERGUSON, KELLY
Address: 221 N BEACH STREET
City-St-Zip: DAYTONA BEACH, FL 32114

Title: TD () Delete
Name: MASON, HENRY T
Address: 900 SMOKERISE BLVD.
City-St-Zip: PORT ORANGE, FL 32127

Title: PD () Delete
Name: COOLIDGE, JENNIFER
Address: 241 W RICH AVE
City-St-Zip: DELAND, FL 32720

Title: SD () Delete
Name: ANDERSON, CAROL
Address: 697 BUENAVISTA AVE
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: FERGUSON, KELLY
Address: 1200 W INTERNATIONAL SPEEDWAY BLVD
City-St-Zip: DAYTONA BEACH, FL 32114 US

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

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

Title: SD (X) Change () Addition
Name: ANDERSON-MCLEAN, CAROL
Address: P O BOX 2
City-St-Zip: DAYTONA BEACH, FL 32115

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: HENRY T MASON

TD

01/07/2009

Electronic Signature of Signing Officer or Director

_____ Date