

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765245

FILED  
Jan 03, 2011  
Secretary of State

**Entity Name:** ARTS COUNCIL OF VOLUSIA COUNTY, INC.

**Current Principal Place of Business:**

900 SMOKERISE BLVD  
PORT ORANGE, FL 32127 US

**New Principal Place of Business:**

**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  
Name: DANIEL, TIMOTHY  
Address: 39 BEECHWOOD DR  
City-St-Zip: ORMOND BEACH, FL 32176 US

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

Title: PD  
Name: ANDERSON-MCLEAN, CAROL  
Address: P O BOX 2  
City-St-Zip: DAYTONA BEACH, FL 32115

Title: VD  
Name: LEONARD, RACHAEL  
Address: 3542 GRANDE TUSCANY WAR  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: HENRY T MASON

TD

01/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date