## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#768160**

FILED Jul 28, 2005 Secretary of State

Entity Name: TENNESSEE WILLIAMS FINE ARTS CENTER FOUNDERS' SOCIETY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

5901 W. JR. COLLEGE RD

KEY WEST, FL 33040 KEY WEST, FL 33045

**Current Mailing Address: New Mailing Address:** 

P O BOX 5137

KEY WEST, FL 33045137 US

FEI Number: 59-2346182 FEI Number Applied For ( ) FEI Number Not Applicable ( ) 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:

THURMAN, KAREN KENDRICK, MELISSA 3990 S. ROOSEVELT BLVD. 200 GREENE STREET KEY WEST, FL 33040 US KEY WEST, FL 33040

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: MELISSA KENDRICK 07/28/2005

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

WOLMAN, HOWARD GREEN, BRYAN Name: Name: 1509 17TH ST Address: 908 FLEMING STREET Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

Title: PD () Delete Title: (X) Change ( ) Addition THURMAN, KAREN Name: THURMAN, KAREN Name:

Address: 3990 S. ROOSEVELT BLVD. Address: 3990 S. ROOSEVELT BLVD. City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

Title: () Delete Title: (X) Change ( ) Addition

MEYERS, RICHARD LEONARD, KAREN Name: Name: 1209 TRUMAN AVE #3 Address: PO BOX 5137 Address: City-St-Zip: KEY WEST, FL 33045 City-St-Zip: KEY WEST, FL 33040

Title: 2VPD ( ) Delete Title: () Change () Addition

Name: GORMAN, JUDITH Name: Address: PO BOX 5137 Address: KEY WEST, FL 33045 City-St-Zip: City-St-Zip:

Title: () Delete Title: PD (X) Change ( ) Addition

KENDRICK, MELISSA KENDRICK, MELISSA Name: Name: 200 GREENE STREET 200 GREENE STREET Address: Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040

Title: (X) Delete Title: () Change () Addition

WOLMAN, HOWARD Name: Name: Address: PO BOX 5137 Address: KEY WEST, FL 33045 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MELISSA KENDRICK **PRES** 07/28/2005

Electronic Signature of Signing Officer or Director

Date