

# **2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 768160

**FILED**  
**Sep 08, 2014**  
**Secretary of State**

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

**Current Principal Place of Business:**

5901 COLLEGE ROAD  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 5137  
KEY WEST, FL 33045137 US

**New Mailing Address:**

**FEI Number:** 59-2346182

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GREEN, BRYAN  
910 WATSON STREET  
KEY WEST, FL 33040 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: BRYAN GREEN

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SHIELDS, MICHAEL  
Address: 1826 FOGARTY AVENUE  
City-St-Zip: KEY WEST, FL 33040 US

Title: D  
Name: GREEN, BRYAN  
Address: 910 WATSON STREET.  
City-St-Zip: KEY WEST, FL 33040 US

Title: SD  
Name: LEIBY, BOB  
Address: 737 LOVE LANE  
City-St-Zip: KEY WEST, FL 33040 US

Title: TD  
Name: ARNOW, PETER  
Address: 1413 ROSE STREET  
City-St-Zip: KEY WEST, FL 33040 US

Title: D  
Name: STAHL, JOYCE  
Address: 727 EATON STREET  
City-St-Zip: KEY WEST, FL 33040 US

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

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: BRYAN GREEN

D

09/08/2014

Electronic Signature of Signing Officer or Director

Date