

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
May 18, 2005 8:00 am
Secretary of State

DOCUMENT # 847935

1. Entity Name
THE INSTITUTE OF CULTURAL AFFAIRS (INC.)



Principal Place of Business
**4750 N SHERIDAN ROAD
CHICAGO, IL 60640-2022 US**

Mailing Address
**4220 NO 25TH STREET
PHOENIX, AZ 85016**

Attn: **Jan McConahay**



REINSTATEMENT

04-05

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
23-7394613

Not Applicable

5. Certificate of Status Desired ☒ **xx**

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**OTTO, LORRAINE
110 LAKE COMMA HILL RD.
LAKE COMO, FL 32157**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Lorraine Otto*
Signature, typed or printed name of registered agent and title if applicable.

May 12, 2005

DATE

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ATD
MORGAN, ROBERT
7720 PALM AIRE LANE
SARASOTA, FL 34243** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
Richard Wilkinson
1851 McGilvra Boulevard E
Seattle, WA 98112** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
JAHN, LELA
1736 STOCKTON ST #8
SAN FRANCISCO, CA 94133** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**600054751516
05/18/05--01069--001 **131.25** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
ELLIOTT, DONALD
5401 E DAKOTA AVE #12
DENVER, CO 80246** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
3202 Lakeshore Drive ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
GILBERT, KENNETH
1925 MORAIN DRIVE
CHAMPAIGN, IL 61822** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
3202 Lakeshore Drive ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
JONES, LYNETTE
14449 NO 6TH PLACE
PHOENIX, AZ 85022** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
3202 Lakeshore Drive ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ADKINS, EMILY
3071 BETWEEN THE PLACES NE
ATLANTA, GA 30339** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Jaimie Leopold
1036 N Euclid Ave
Tucson, Arizona 85719** ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE *Lela Jahn* **Lela Jahn**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 12, 2005

Date

Daytime Phone #



2/2

Transforming Communities and Organizations with the Technology of Participation™

May 12, 2005

Uniform Business Report
Division of Corporations
409 East Gaines St.
Tallahassee, FL32302-1500

RE: Entity# 847935
FEIN # 23-7394613

To Whom It May Concern:

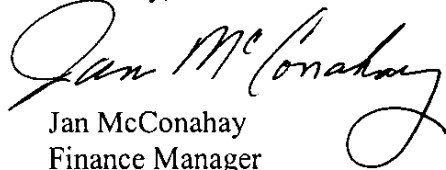
This is a formal request that all correspondence and report forms be mailed here to me, instead of to the principal office in Chicago Ill. If you must mail forms or correspondence to the Registered agent please mail copies to me also. This would be greatly appreciated and enable us to meet deadlines in a timely manner. When they go to the registered agent I never receive notification.

Please send to: Jan McConahay
Institute of Cultural Affairs
Finance Manager
4220 North 25th St Apt 2
Phoenix, AZ 85016

Please feel free to contact me if you have questions or comments – 602-955-4811
jmccconahay@ica-usa.org.

Thank you very much.

Sincerely,


Jan McConahay
Finance Manager