

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002919

FILED
Mar 25, 2009
Secretary of State

Entity Name: LOVEWELL INSTITUTE FOR THE CREATIVE ARTS, INC.

Current Principal Place of Business:

2805 NE OAKLAND PARK BLVD
STE #224
FT. LAUDERDALE, FL 33306

New Principal Place of Business:

1000 CORPORATE DR.
STE #340
FT. LAUDERDALE, FL 33334

Current Mailing Address:

2805 NE OAKLAND PARK BLVD
STE #224
FT. LAUDERDALE, FL 33306

New Mailing Address:

1000 CORPORATE DR.
STE #340
FT. LAUDERDALE, FL 33334

FEI Number: 48-1066435

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOEMAKER, WILLIAM E
4850 NE 13TH AVE
FT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

SHOEMAKER, WILLIAM E
1000 CORPORATE DR.
FT LAUDERDALE, FL 33334 US

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:

03/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPC () Delete
Name: SPANGLER, DAVID
Address: 1600 NE 18TH AVENUE
City-St-Zip: FT LAUDERDALE, FL 33305

Title: DST () Delete
Name: MATHIS, HARRIET B
Address: 2901 NE 21ST TERRACE
City-St-Zip: FT. LAUDERDALE, FL 33306

Title: D () Delete
Name: SIGARS, L. JANA
Address: 4060 KIAORA ST
City-St-Zip: COCONUT GROVE, FL 33133

Title: P () Delete
Name: MASI, WENDY
Address: 2401 LAGUNA DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D () Delete
Name: FRENKEL, DEBRA
Address: 2117 N 14TH AVE
City-St-Zip: HOLLYWOOD, FL 33020

Title: D () Delete
Name: SHOEMAKER, WILLIAM E
Address: 4850 NE 13TH AVENUE
City-St-Zip: FT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: D (X) Change () Addition
Name: SHOEMAKER, WILLIAM E
Address: 1000 CORPORATE DR.
City-St-Zip: FT LAUDERDALE, FL 33334

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: WILLIAM E. SHOEMAKER

D

03/25/2009

Electronic Signature of Signing Officer or Director

Date