## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F95000002919

FILED Apr 24, 2012 Secretary of State

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

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

1000 CORPORATE DR.

STE #330

FT. LAUDERDALE, FL 33334

Current Mailing Address: New Mailing Address:

1000 CORPORATE DR.

STE #330

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: Name and Address of New Registered Agent:

SHOEMAKER, WILLIAM E 1000 CORPORATE DR., SUITE 330 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Γitle: DPC

Name: SPANGLER, DAVID
Address: 1600 NE 18TH AVENUE
City-St-Zip: FT LAUDERDALE, FL 33305

Title: DS

 Name:
 MATHIS, HARRIET B

 Address:
 2901 NE 21ST TERRACE

 City-St-Zip:
 FT. LAUDERDALE, FL 33306

Title:

Name: POMERANTZ, WENDY
Address: 16100 EMERALD ESTATES DR.

City-St-Zip: WESTON, FL 33331

Title: P, D

Name: MASI, WENDY Address: 2401 LAGUNA DRIVE

City-St-Zip: FORT LAUDERDALE, FL 33316

Title:

 Name:
 FISCHLER, ABRAHAM

 Address:
 8640 BANYON WAY

 City-St-Zip:
 TAMARCA, FL 33321 US

Title: [

Name: SHOEMAKER, WILLIAM E Address: 1000 CORPORATE DR. City-St-Zip: FT LAUDERDALE, FL 33334

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: WILLIAM E SHOEMAKER P 04/24/2012