

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004973

FILED
May 01, 2005
Secretary of State

Entity Name: CATHERINE COLE TAYLOR CENTER FOR THE ARTS, INC.

Current Principal Place of Business:

PO BOX 4869
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

32 DRISCOLL DRIVE
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

PO BOX 4869
SANTA ROSA BEACH, FL 32459

New Mailing Address:

32 DRISCOLL DRIVE
SANTA ROSA BEACH, FL 32459

FEI Number: 59-3713393 **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:

TEDESA, PAMLEA A
63 S. CENTRE TRAIL
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

TAYLOR, KITTY
32 DRISCOLL DRIVE
SANTA ROSA BEACH, FL 32459 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: KITTY TAYLOR

05/01/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BUTLER, VAN NESS
Address: 200 BANFILL STREET
City-St-Zip: GRAYTON BEACH, FL 32459

Title: D (X) Delete
Name: DAMROTH, MARY
Address: 2078 OLDE TOWNE AVE
City-St-Zip: DESTIN, FL 32541

Title: D (X) Delete
Name: INGRAM, JAKE
Address: 2489 S COUNTY HWY 395
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D (X) Delete
Name: TAYLOR, KITTY
Address: 12 MAGNOLIA ST
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: S (X) Delete
Name: LUCAS, SUSAN
Address: 25 CRESCENT ROAD
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: D (X) Delete
Name: STANKO, JOE
Address: 55 NATURE WAY
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TAYLOR, KITTY
Address: 32 DRISCOLL DRIVE
City-St-Zip: SANTA ROSA BEACH, FL 32459

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:

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: KITTY TAYLOR

D

05/01/2005

Electronic Signature of Signing Officer or Director

Date