

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90435 019 ****61.25

DOCUMENT # N00453 1. Entity Name ISLAND ART ASSOCIATION, INC.					
Principal Place of Business 18 N 2ND STREET FERNANDINA BEACH, FL 32034			Mailing Address POST OFFICE BOX 1251 FERNANDINA BEACH, FL 32035-1251 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2353054	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent TYSON, DIANA 3358 OLD NASSAUVILLE ROAD FERNANDINA BEACH, FL 32034			7. Name and Address of New Registered Agent Name: PIGG, LUTHER R. Street Address (P.O. Box Number is Not Acceptable): 1630 Ocean Forest Dr City: FERNANDINA BEACH FL Zip Code: 32034		
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: <u><i>Luther R. Pigg</i></u> LUTHER R. PIGG <u>April 26, 2007</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		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	PD MOORE, ROGER 57 LAUREL DRIVE FERNANDINA BEACH, FL 320346525	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	P/D CRAVEN, MELBA 613 LITTLE PINEY ISLAND FERNANDINA BEACH, FL 32034 - 6784	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST- ZIP	VP CRAVEN, MELBA 613 LITTLE PINEY ISLAND FERNANDINA BEACH, FL 320346784	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	V/D MULLIS, GEORGINA 206 SOUTH 17th ST FERNANDINA BEACH, FL 32034 - 2825	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST- ZIP	VP HOOKS, PATRICIA 4964 SPANISH OAKS CIR FERNANDINA BEACH, FL 320345679	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	V/D COOPER, VICKI 444 PINEY ISLAND CT FERNANDINA BEACH, FL 32034	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST- ZIP	T TYSON, DIANA 3358 OLD NASSAUVILLE ROAD FERNANDINA BEACH, FL 32034	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	T/D MOORE, ROGER PIGG, LUTHER R. 1630 Ocean Forest Dr FERNANDINA BEACH, FL 32034 - 5624	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST- ZIP	S MOZENA, LOUISE 1 MARSH CK RD FERNANDINA BEACH, FL 320346413	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	S/D MOZENA, LOUISE 1 MARSH CREEK RD FERNANDINA BEACH, FL 32034 - 6413	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST- ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u><i>Luther R. Pigg</i></u> LUTHER R. PIGG <u>April 26, 2007 (904) 261-4563</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #</small>					