## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000005053

FILED May 27, 2005 Secretary of State

Entity Name: THE LEEPA-RATTNER MUSEUM OF ART, INC.

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

8580-66TH ST N 600 KLOSTERMAN ROAD PINELLAS PARK, FL 33781 PALM HARBOR, FL 34683

Current Mailing Address: New Mailing Address:

8580-66TH ST N P.O. BOX 1545

PINELLAS PARK, FL 33781 TARPON SPRINGS, FL 34688

FEI Number: 59-3733512 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: Name and Address of New Registered Agent:

HENNIGER, DAVID T HENNIGER, DAVID T 8580-66TH ST N 13805 58TH ST. N

PINELLAS PARK, FL 33781 US CLEARWATER, FL 33706 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: 05/27/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: DSMD ( ) Delete Title: DSMD (X) Change ( ) Addition

 Name:
 LYNN, WHITELAW R
 Name:
 WHITELAW, LYNN R

 Address:
 600 KLOSTERMAN RD
 Address:
 600 KLOSTERMAN RD

 City-St-Zip:
 PALM HARBOR, FL 34683
 City-St-Zip:
 PALM HARBOR, FL 34683

Title: DC ( ) Delete Title: DC (X) Change ( ) Addition Name: SAUNDERS, JOAN Name: LARSEN, ANN

 Address:
 600 KLOSTERMAN RD
 Address:
 600 KLOSTERMAN RD

 City-St-Zip:
 PALM HARBOR, FL 34683
 City-St-Zip:
 PALM HARBOR, FL 34683

Title: DT ( ) Delete Title: ( ) Change ( ) Addition

Name:HUNT, DOTSONName:Address:ST PETERSBURG COLLEGE 8580-66TH ST NAddress:City-St-Zip:PINELLAS PARK, FL 33781City-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: LYNN WHITELAW DSMD 05/27/2005