

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006670

Entity Name: ACADEMY OF SCOTTISH ARTS, INC.

FILED  
Mar 03, 2004  
Secretary of State

## Current Principal Place of Business:

2030 BISPHAM ROAD  
SUITE 2  
SARASOTA, FL 34233

## New Principal Place of Business:

2030 BISPHAM ROAD  
SUITE 2  
SARASOTA, FL 34231

## Current Mailing Address:

6408 TANAGER STREET  
SARASOTA, FL 34241

## New Mailing Address:

2030 BISPHAM ROAD  
SARASOTA, FL 34231

FEI Number: 65-1144585

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WIEGAND, TERESA  
2030 BISPHAM ROAD  
SARASOTA, FL 34233

## Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete  
Name: WIEGAND, TERESA R  
Address: 6408 TANAGER STREET  
City-St-Zip: SARASOTA, FL 34241

Title: VD ( ) Delete  
Name: WIEGAND, GREGG A  
Address: 6408 TANAGER STREET  
City-St-Zip: SARASOTA, FL 34241

Title: SD ( ) Delete  
Name: MACDONALD, RODERICK W  
Address: 2937 WEBBER PLACE  
City-St-Zip: SARASOTA, FL 34232

Title: TD ( ) Delete  
Name: MACDONALD, GLADYS  
Address: 2937 WEBBER PLACE  
City-St-Zip: SARASOTA, FL 34232

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: WIEGAND, TERESA R  
Address: 5309 ASHTON MANOR DRIVE  
City-St-Zip: SARASOTA, FL 34233

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: TERESA R. WIEGAND

PD

03/03/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date