

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01552

FILED
Mar 14, 2006
Secretary of State

Entity Name: A.E. "BEAN" BACKUS GALLERY & MUSEUM, INC.

Current Principal Place of Business:

500 NORTH INDIAN RIVER DR.
FORT PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

500 NORTH INDIAN RIVER DR.
FORT PIERCE, FL 34950 US

New Mailing Address:

FEI Number: 59-3075234

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERG, PEGGY
3401 S. INDIAN RIVER DRIVE
FORT PIERCE, FL 34982 US

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: BERG, PEGGY
Address: 3401 S. INDIAN RIVER DRIVE
City-St-Zip: FT. PIERCE, FL 34982

Title: TD () Delete
Name: BURGESS, PAULETTE
Address: 4910 RALLS ROAD
City-St-Zip: FORT PIERCE, FL 34981

Title: VPD () Delete
Name: WHEELLEY, LEONARD
Address: 7003 SHANNON DRIVE
City-St-Zip: FORT PIERCE, FL 34951

Title: SD () Delete
Name: JANIE, HINKLE
Address: 3113 N. INDIAN RIVER DRIVE
City-St-Zip: ST. LUCIE VILLAGE, FL 34946

Title: ED () Delete
Name: FREDRICK, KATHLEEN P
Address: 759 RIO VISTA DRIVE
City-St-Zip: FORT PIERCE, FL 34982

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: RICE, JAMES
Address: 2521 N INDIAN RIVER DRIVE
City-St-Zip: FORT PIERCE, FL 34946

Title: VPD (X) Change () Addition
Name: WHEELLEY, LEONARD
Address: 1129 FERNANDINA DRIVE
City-St-Zip: FORT PIERCE, FL 34949

Title: SD (X) Change () Addition
Name: JANIE, HINKLE
Address: 940 S. US#1
City-St-Zip: FT. PIERCE, FL 34950

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 Chapter 119, 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: KATHLEEN P. FREDRICK

ED

03/14/2006

Electronic Signature of Signing Officer or Director

Date