2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2010
Secretary of State

DOCUMENT# N01552

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:

500 NORTH INDIAN RIVER DR.
FORT PIERCE, FL 34950

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: SECR
Name: JEFFERSON, ELIZABETH
Address: 430 CHAMBERLAIN BLVD.
City-St-Zip: FT. PIERCE, FL 34946

Title: TD
Name: NELSON, DANIEL
Address: 5120 OLEANDER BLVD.
City-St-Zip: FORT PIERCE, FL 34982

Title: PD
Name: WHEELEY, LEONARD
Address: 1129 FERNANDINA DRIVE
City-St-Zip: FORT PIERCE, FL 34949

Title: VPD
Name: JANIE, HINKLE
Address: 940 S. US#1
City-St-Zip: FT. PIERCE, FL 34950

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

I hereby 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 all other like empowered.

SIGNATURE: KATHLEEN P. FREDRICK ED 01/06/2010

Electronic Signature of Signing Officer or Director Date