

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006577

FILED  
Jan 09, 2012  
Secretary of State

**Entity Name:** DUVAL COMMUNITY ARTS COUNCIL, INC.

**Current Principal Place of Business:**

1500 N.W. 36TH WAY  
GAINESVILLE, FL 32605

**New Principal Place of Business:**

**Current Mailing Address:**

1500 N.W. 36TH WAY  
GAINESVILLE, FL 32605

**New Mailing Address:**

**FEI Number:** 05-0523269

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SMITH, BRUCE M  
2622 N.W. 43RD STREET SUITE C-5  
GAINESVILLE, FL 32606 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  
**Name:** PEOPLES, ALFRED M  
**Address:** 611 SE 13TH TERR  
**City-St-Zip:** GAINESVILLE, FL 32641

**Title:** D  
**Name:** SMITH, BRUCE  
**Address:** 2622 NW 43ST CS  
**City-St-Zip:** GAINESVILLE, FL 32606

**Title:** SD  
**Name:** SKINNER, JUDY  
**Address:** 1323 N.W. 2ND STREET  
**City-St-Zip:** GAINESVILLE, FL 32601

**Title:** TD  
**Name:** HOMAN, NORMA  
**Address:** 1500 NW 36 WAY  
**City-St-Zip:** GAINESVILLE, FL 32605

**Title:** VPD  
**Name:** BASKIN, CAROL  
**Address:** 511 NE 25TH ST  
**City-St-Zip:** GAINESVILLE, FL 32641

**Title:** D  
**Name:** RAWLS, JOHN C DR.  
**Address:** 5808 SW 49TH ST  
**City-St-Zip:** GAINESVILLE, FL 32608

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:** NORMA. M. HOMAN

T

01/09/2012

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

\_\_\_\_\_  
Date