

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005067

FILED
Apr 12, 2004
Secretary of State

Entity Name: HOGTOWN CREEK LITERATURE AND ARTS FORUM, INC.

Current Principal Place of Business:

2601 SW 8TH DRIVE
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

2601 SW 8TH DRIVE
GAINESVILLE, FL 32601

New Mailing Address:

FEI Number: 01-0788669

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARANZANA, ELISA M
2601 SW 8TH DRIVE
GAINESVILLE, FL 32601 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: P () Delete
Name: MARTIN, MICHAEL
Address: MARATHONWEG 84
City-St-Zip: AMSTERDAM, NL 1076 TM NL

Title: T () Delete
Name: MARANZANA, ELISA
Address: 2601 SW 8TH DRIVE
City-St-Zip: GAINESVILLE, FL 32601 US

Title: S () Delete
Name: STEVENSON, MATTHEW
Address: 18 RUE DE LA MAISON-FORTE
City-St-Zip: 1287 LACONNEX, SW 1287 SW

Title: V () Delete
Name: KNAPEN, MONIQUE
Address: JOHN ADAMS INSTITUTE, WEST-INDISCH HUIS
City-St-Zip: HERENMARKT 97, AMSTERDAM, NL 1013 EC NL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ELISA MARANZANA

T

04/12/2004

Electronic Signature of Signing Officer or Director

Date