

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002514

FILED  
May 05, 2006  
Secretary of State

**Entity Name:** TIMUCUA ARTS FOUNDATION, INCORPORATED

**Current Principal Place of Business:**

11113 FINCHLEY PLACE  
ORLANDO, FL 32837

**New Principal Place of Business:**

**Current Mailing Address:**

11113 FINCHLEY PLACE  
ORLANDO, FL 32837

**New Mailing Address:**

**FEI Number:** 20-0692046      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

FOX, RICHARD P  
11113 FINCHLEY PLACE  
ORLANDO, FL 32837      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: ED      ( ) Delete  
Name: GLAZER, BENOIT  
Address: 14507 TIMUCUA CT  
City-St-Zip: ORLANDO, FL 32837

Title: D      ( ) Delete  
Name: FOX, RICHARD P  
Address: 11113 FINCHLEY PLACE  
City-St-Zip: ORLANDO, FL 32837

Title: D      ( ) Delete  
Name: CORRIVEAU, ELAINE  
Address: 14507 TIMUCUA CT  
City-St-Zip: ORLANDO, FL 32837

Title: D      ( ) Delete  
Name: POWERS, ALMA  
Address: 300 SHADOW BAY BLVD  
City-St-Zip: LONGWOOD, FL 32779

Title: D      ( ) Delete  
Name: WEINBERG, KAREN  
Address: 250 CAROLINA AVE #303  
City-St-Zip: WINTER PARK, FL 32789

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D      (X) Change ( ) Addition  
Name: MALONEY, MARIA A  
Address: 1368 WESTDALE AVE.  
City-St-Zip: WINTER PARK, FL 32792

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 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: RICHARD P. FOX

D

05/05/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date