

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004922

FILED  
Mar 20, 2011  
Secretary of State

**Entity Name:** ARTS ALLIANCE OF LEMON BAY, INC.

**Current Principal Place of Business:**

477 W DEARBORN ST.  
ENGLEWOOD, FL 34223

**New Principal Place of Business:**

**Current Mailing Address:**

175 CEDAR ST  
ENGLEWOOD, FL 34223

**New Mailing Address:**

**FEI Number:** 56-2460291

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

COLBURN, JR., HARRY S  
444 WEST DEARBORN STREET  
ENGLEWOOD, FL 34223 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: BORCHARD, STEPHANIE  
Address: 91 N BROADWAY ST  
City-St-Zip: ENGLEWOOD, FL 34224

Title: D  
Name: GAVEL, BARBARA  
Address: 285 CAPSTAN DRIVE  
City-St-Zip: PLACIDA, FL 33946

Title: VPD  
Name: BRISCOE, JUDY  
Address: 477 W DEARBORN ST  
City-St-Zip: ENGLEWOOD, FL 34223

Title: TREA  
Name: DEMETRIOU, MARTHA  
Address: 175 CEDAR ST  
City-St-Zip: ENGLEWOOD, FL 34223

Title: SEC  
Name: CHADWICK, MELANIE  
Address: 3631 BARBARY LANE  
City-St-Zip: NORTH PORT, FL 34287

Title: D  
Name: DAVIDSON, DIANE  
Address: 91 N. BROADWAY ST  
City-St-Zip: ENGLEWOOD, FL 34223

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: MARTHA A DEMETRIOU

TREA

03/20/2011

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

\_\_\_\_\_  
Date