

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008200

FILED  
Feb 21, 2005  
Secretary of State

Entity Name: MUSEUM OF HUMANITIES AND THE ARTS, INC.

## Current Principal Place of Business:

100 E LINTON BLVD STE 304A  
DELRAY BCH, FL 33483

## New Principal Place of Business:

100 E LINTON BLVD  
SUITE 304A  
DELRAY BCH, FL 33483

## Current Mailing Address:

100 E LINTON BLVD STE 304A  
DELRAY BCH, FL 33483

## New Mailing Address:

100 E LINTON BLVD  
SUITE 304A  
DELRAY BCH, FL 33483

FEI Number: 20-1155066

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MEDNICK, GLENN  
577 NW 120TH DR  
CORAL SPRINGS, FL 33071 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: D ( ) Delete  
Name: ALROD, ROBERT  
Address: 2727 N OCEAN BLVD #H4 304A  
City-St-Zip: BOCA RATON, FL 33431

Title: D ( ) Delete  
Name: BATMASIAN, MARTA  
Address: 215 N FEDERAL HWY  
City-St-Zip: BOCA RATON, FL 33432

Title: D ( ) Delete  
Name: PACKMAN, CONNIE  
Address: 99 SE MIZNER BLVD #733  
City-St-Zip: BOCA RATON, FL 33432

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: ALROD, ROBERT  
Address: 2727 N OCEAN BLVD #TH4  
City-St-Zip: BOCA RATON, FL 33431

Title: D (X) Change ( ) Addition  
Name: BATMASIAN, MARTA  
Address: 890 LAKE DRIVE  
City-St-Zip: BOCA RATON, FL 33432

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: CONNIE PACKMAN

D

02/21/2005

Electronic Signature of Signing Officer or Director

Date