

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002746

FILED  
Jun 04, 2007  
Secretary of State

**Entity Name:** SANFORD SEMINOLE ART ASSOCIATION, INC.

**Current Principal Place of Business:**

777 GENERAL HUTCHISON PKWY  
LONGWOOD, FL 32750

**New Principal Place of Business:**

**Current Mailing Address:**

777 GENERAL HUTCHISON PKWY  
LONGWOOD, FL 32750

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

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

CRAMER, CHARLES W  
1411 EDGEWATER DR STE 200  
ORLANDO, FL 32804 US

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: CHENET, KATHLEEN  
Address: 777 GENERAL HUTCHISON PKWY  
City-St-Zip: LONGWOOD, FL 32750

Title: D ( ) Delete  
Name: LINSLEY, LAURIE  
Address: 130 CALICO RD  
City-St-Zip: LAKE MARY, FL 32746

Title: D ( ) Delete  
Name: STEVENS, DEELEE  
Address: 158 SHADOW TR  
City-St-Zip: LONDWOOD, FL 32750

Title: D ( ) Delete  
Name: TOWLES, CAROLYN  
Address: 1328 AUGUSTA NATIONAL BLVD  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D ( ) Delete  
Name: GRIFFIN, FANNIE  
Address: 1755 ADAMS ST  
City-St-Zip: LONGWOOD, FL 32750

**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:

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

I hereby certify that the information supplied with this filing does not qualify 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: KATHLEEN CHENET

D

06/04/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date