

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002746

FILED
Apr 05, 2012
Secretary of State

Entity Name: SANFORD SEMINOLE ART ASSOCIATION, INC.

Current Principal Place of Business:

121 EDGEWATER CIRCLE
SANFORD, FL 32773

New Principal Place of Business:

147 WOOD RIDGE TRAIL
SANFORD, FL 32771

Current Mailing Address:

P.O. BOX 2918
SANFORD, FL 32772

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAMER, CHARLES W
1411 EDGEWATER DR
SUITE 200
ORLANDO, FL 32804 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: PRES
Name: HOOFRING, CHARLENE
Address: 147 WOOD RIDGE TRAIL
City-St-Zip: SANFORD, FL 32771

Title: VPRE
Name: STEVENS, DEELEE
Address: 523 WEST PLANTATION BOULEVARD
City-St-Zip: LAKE MARY, FL 32746

Title: TREA
Name: HOOFRING, CHARLENE
Address: 147 WOOD RIDGE TRAIL
City-St-Zip: SANFORD, FL 32771

Title: SEC
Name: BUTLER, SHARON
Address: 122 CLUB ROAD
City-St-Zip: SANFORD, FL 32771

Title: DTR
Name: KRETTLER, PAULINE
Address: 50 WENTWORTH DR
City-St-Zip: DEBARY, FL 32713

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: CHARLENE HOOFRING

PRES

04/05/2012

Electronic Signature of Signing Officer or Director

Date