2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# N06000005592

Entity Name: CULTURAL CANVAS, INC.

Current Principal Place of Business:

1001 NORTH BARCELONA STREET
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

1001 NORTH BARCELONA STREET
PENSACOLA, FL 32501

New Mailing Address:

FEI Number: 20-4971762 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LATSHAW, MILDRED
1001 NORTH BARCELONA STREET
PENSACOLA, FL 32501 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 ( ) Delete
Name: LATSHAW, SARA
Address: 1001 NORTH BARCELONA STREET
City-St-Zip: PENSACOLA, FL 32501

Title: VD ( ) Delete
Name: LAMBE, ZOE
Address: 65/41 SOI 7 SUNDOK ROAD
City-St-Zip: CHIANG MAI, THAILAND 50200,

Title: D ( ) Delete
Name: WILLIAMS, PAUL
Address: 9 E GREGORY ST
City-St-Zip: PENSACOLA, FL 32502

Title: TD ( ) Delete
Name: BROWN, LOREN
Address: 1702 STEPEN'S CREEK CT
City-St-Zip: SUGARLAND, TX 77478

Title: SD ( ) Delete
Name: MCCARTHY, ANNA
Address: KNOCKBOUNCE KILLCULLEN
City-St-Zip: COUNTY KILDARE, IRELAND,

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: SARA LATSHAW PD 01/19/2009

Electronic Signature of Signing Officer or Director — Date