

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006362

FILED
Feb 07, 2011
Secretary of State

Entity Name: THE ARTISTS GUILD OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

4318 LAFAYETTE STREET
MARIANNA, FL 32447

New Principal Place of Business:

Current Mailing Address:

PO BOX 1605
MARIANNA, FL 32447

New Mailing Address:

FEI Number: 20-5039597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIMBROUGH, MICHELE T
2916 RUSS STREET
MARIANNA, FL 32446 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: S
Name: LOIS, JONES
Address: P. O. BOX 329
City-St-Zip: MARIANNA, FL 32447

Title: V
Name: KAREN, ROLAND
Address: 2697 GILBERTS MILL ROAD
City-St-Zip: CHIPLEY, FL 32428

Title: P
Name: ZURENDA, NANCY
Address: 4982 WHITETAIL DRIVE
City-St-Zip: MARIANNA, FL 32448

Title: T
Name: BARBARA, REVELL
Address: P. O. BOX 329
City-St-Zip: GRAND RIDGE, FL 32442

Title: T
Name: CARNLEY, SAM
Address: 6635 WOLF POND ROAD
City-St-Zip: BASCOM, FL 32423

Title: T
Name: BERIT, JACKSON
Address: 466 SILVER LAKE NORTH
City-St-Zip: MARIANNA, FL 32448

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: SAM CARNLEY

MR.

02/07/2011

Electronic Signature of Signing Officer or Director

Date