

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008070

FILED  
Jan 09, 2007  
Secretary of State

Entity Name: MUSEUM OF AUTODIDACTIC ART, INC.

**Current Principal Place of Business:**

12 SE 9TH AVENUE  
DEERFIELD BEACH, FL 33441

**New Principal Place of Business:**

**Current Mailing Address:**

12 SE 9TH AVENUE  
DEERFIELD BEACH, FL 33441

**New Mailing Address:**

FEI Number: 20-5730225

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REESE, PAUL  
12 SE 9TH AVENUE  
DEERFIELD BEACH, FL 33441 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: REESE, PAUL  
Address: 12 SE 9TH AVENUE  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: D ( ) Delete  
Name: REESE, DAVID L  
Address: 12 SE 9TH AVENUE  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: D ( ) Delete  
Name: REESE, ELEANOR H  
Address: 12 SE 9TH AVENUE  
City-St-Zip: DEERFIELD BEACH, FL 33441

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: PAUL REESE

PRES

01/09/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date