

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011979

FILED
May 02, 2009
Secretary of State

Entity Name: ST PETERSBURG REPRESENTATIONAL ART ASSOCIATION INC.

Current Principal Place of Business:

123 BAYPOINT DR NE
ST PETERSBURG, FL 33704

New Principal Place of Business:

Current Mailing Address:

123 BAYPOINT DR NE
ST PETERSBURG, FL 33704

New Mailing Address:

FEI Number: 13-4348791 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

CHAPIN, JANE C
123 BAYPOINT DR NE
ST PETERSBURG, FL 33704 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: D () Delete
Name: CHAPIN, JANE C
Address: 123 BAYPOINT DR NE
City-St-Zip: ST PETERSBURG, FL 33704

Title: AD () Delete
Name: LATOURRETTE, VIRGINIA
Address: 10648 WEYBRIDGE DR
City-St-Zip: TAMPA, FL 33626

Title: AD () Delete
Name: PUMFREY, LAWRENCE
Address: 11317 122ND AVE
City-St-Zip: LARGO, FL 33778

Title: S () Delete
Name: ANDREASON, KIRSTEN
Address: 1747 LAKE CYPRESS DR
City-St-Zip: SAFETY HARBOR, FL 34695

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: AD (X) Change () Addition
Name: CUNDIFF, KATIE DOBSON
Address: 6420 FOX HUNT LANE
City-St-Zip: BRADENTON, FL 34202

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

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

Title: T () Change (X) Addition
Name: MARY, ERICKSON
Address: 216 PALERMO PL
City-St-Zip: VENICE, FL 34285

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: JANE C CHAPIN

D

05/02/2009

Electronic Signature of Signing Officer or Director

Date