

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000007764

FILED
Mar 09, 2012
Secretary of State

Entity Name: FLORIDA WOMEN'S ARTS ASSOCIATION INC

Current Principal Place of Business:

915 FRUITWOOD PLACE
PORT ORANGE, FL 321277777 US

New Principal Place of Business:

Current Mailing Address:

915 FRUITWOOD PLACE
PORT ORANGE, FL 321277777 US

New Mailing Address:

FEI Number: 36-4708338

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEONE, MARY E
850 SWALLOW STREET
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

CARSON, FRANCES H
915 FRUITWOOD PLACE
PORT ORANGE, FL 321277777 US

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: FRANCES H CARSON

03/09/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: CARSON, FRANCES H
Address: 915 FRUITWOOD PLACE
City-St-Zip: PORT ORANGE, FL 321277777 US

Title: VP
Name: BLOW, SHEILA M
Address: 610 WEST COURT
City-St-Zip: TITUSVILLE, FL 32796 US

Title: VP
Name: SAUL, SYLVIA C
Address: 421 SOUTH KINGSBURY BLVD
City-St-Zip: DELAND, FL 327205149 US

Title: T
Name: LEONE, MARY E
Address: 850 SWALLOW STREET
City-St-Zip: DELTONA, FL 32725 US

Title: S
Name: MCCUEN, AIDA
Address: 3259 ROLAND DR.
City-St-Zip: DELTONA, FL 32738 US

Title: D
Name: MILLER, DIANE M
Address: 602 GARDEN CLUB DRIVE
City-St-Zip: DELAND, FL 327247328 US

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: FRANCES H CARSON

P

03/09/2012

Electronic Signature of Signing Officer or Director

Date