

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N12000006846

FILED
Sep 02, 2014
Secretary of State

Entity Name: LOIS COWLES HARRISON CENTER FOR THE VISUAL AND PERFORMING ARTS, INC.

Current Principal Place of Business:

750 HOLLINGSWORTH ROAD
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

750 HOLLINGSWORTH ROAD
LAKELAND, FL 33801

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIBSON, ROBIN
299 E. STUART AVENUE
LAKE WALES, FL 33853 US

Name and Address of New Registered Agent:

WARD, DARYL
750 HOLLINGSWORTH RD
LAKELAND, FL 33801 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: DARYL WARD

09/02/2014

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: PITTMAN, JAMES
Address: 750 HOLLINGSWORTH RD
City-St-Zip: LAKELAND, FL 33801

Title: PE
Name: CARTER, MICHAEL
Address: 750 HOLLINGSWORTH RD
City-St-Zip: LAKELAND, FL 33801 UN

Title: SEC
Name: CHADDICK, ROBBIN
Address: 750 HOLLINGSWORTH RD
City-St-Zip: LAKELAND, FL 33801

Title: TRE
Name: BOYNTON, RACHEL
Address: 750 HOLLINGSWORTH RD
City-St-Zip: LAKELAND, FL 33801

Title: AT
Name: SMITH, CHRISTINE
Address: 750 HOLLINGSWORTH RD
City-St-Zip: LAKELAND, FL 33801

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: RACHEL BOYNTON

TRES

09/02/2014

Electronic Signature of Signing Officer or Director

Date