

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18265

FILED  
Apr 29, 2005  
Secretary of State

**Entity Name:** FLORIDA ASSOCIATION OF LOCAL ARTS AGENCIES, INC.

**Current Principal Place of Business:**

5600 N. FLAGLER DR.  
#1410  
WEST PALM BEACH, FL 33407

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3486  
WEST PALM BEACH, FL 33402 US

**New Mailing Address:**

**FEI Number:** 53-2952677

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LONG, SHERRON  
5600 N. FLAGLER DR.  
#1410  
WEST PALM BEACH, FL 33407 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: VPD ( ) Delete  
Name: BECHT, MARY  
Address: 100 S ANDREWS AVE  
City-St-Zip: FT LAUDERDALE, FL

Title: D ( ) Delete  
Name: CASWELL, PATRICIA  
Address: 1351 FRUITVILLE RD  
City-St-Zip: SARASOTA, FL

Title: DT ( ) Delete  
Name: KEEBLE, ARTHUR  
Address: 725 E KENNEDY ST  
City-St-Zip: TAMPA, FL

Title: COO ( ) Delete  
Name: LONG, SHERRON  
Address: 5600 N. FLAGLER DR.  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D ( ) Delete  
Name: BURKE, KAY E  
Address: 2725 JUDGE FEAN JAMIESON WAY, C202  
City-St-Zip: VIERA, FL 32940

Title: SD ( ) Delete  
Name: HASKELL, MONICA  
Address: 5100 COLLEGE RD  
City-St-Zip: KEY WEST, FL 33040

**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:

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 Section 119.07(3)(i), 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: SHERRON LONG

COO

04/29/2005

Electronic Signature of Signing Officer or Director

Date