2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007
Secretary of State

DOCUMENT# N20081

Entity Name: FIRST CITY ARTS ALLIANCE, INC.

Current Principal Place of Business:

401 NORTH REUS STREET
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

226 S. PALAFOX STE. 204
PENSACOLA, FL 32501

New Mailing Address:

FEI Number: 59-2787230 **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:

RICHARDS, NEIL
4430 YOUPON ROAD
PENSACOLA, FL 32526 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:	P	( ) Delete
Name:	ORTEZ-MIGUEZ, MICHELLE	
Address:	319 WEST DESOTO STREET	
City-St-Zip:	PENSACOLA, FL 32501	
Title:	VP	( ) Delete
Name:	BAILEY, DAVID	
Address:	17 MANOR DRIVE	
City-St-Zip:	PENSACOLA, FL 32507	
Title:	S	( ) Delete
Name:	MILSOP, FRAN	
Address:	422 WEST GREGORY STREET	
City-St-Zip:	PENSACOLA, FL 32501	
Title:	T	( ) Delete
Name:	RICHARDS, NEIL	
Address:	4430 YOUPON ROAD	
City-St-Zip:	PENSACOLA, FL 32526	

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:	

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: NEIL R RICHARDS T 05/01/2007
Electronic Signature of Signing Officer or Director — Date