2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State
05-19-2002 90203 045 ****61.25

DOCUMENT # N21690

1. Entity Name

FLORIDA SUNCOAST WATERCOLOR SOCIETY, INC.

Principal Place of Business	Mailing Address
MANATEE ART LEAGUE 209 NINTH ST WEST BRADENTON FL 34205 US	SHARON CURTIS 10611 MARIANNE LANE NEW PORT RICHEY FL 34654 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0119858 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CURTIS, SHARON 10611 MARIANNE LANE NEW PORT RICHEY FL 34654	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HARPER, LOIS 4208 MARLIN LANE PALMETTO FL 34221-5601	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T CURTIS, SHAROM 10611 MARIANNE LANE NEW PORT RICHEY FL 34654	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD PIERS, MARK 5206 SNEAD ISLAND RD. PALMETTO FL 34221-5502	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1st VPD Teller, Doug 5719 Merrimac Dr. Sarasota, FL 34231	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD JACKSON, VELMA 4425 BENT TREE BLVD. SARASOTA FL 34241	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	2nd VPD Morse, June 622 Ranger Ln. Longboat Key, FL 34228	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Dougherty, Carole 3283 Sweetleaf Terr. Mt. Laurel, NJ 08054	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Sharon R. Curtis 4/29/02 727-863-8103
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #