2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

May 03, 2004 8:00 am **Secretary of State** DOCUMENT # N21690 1. Entity Name 05-03-2004 91219 013 ****61.25 FLORIDA SUNCOAST WATERCOLOR SOCIETY, INC. Principal Place of Business 🕽 Mailing Address SHARON CURTIS 10611 MARIANNE LANE NEW PORT RICHEY FL 34654 MANATEE ART LEAGUE 209 NINTH ST WEST BRADENTON FL 34205 24066601 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) Applied For City & State City & State 4. FEI Number 65-0119858 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CURTIS, SHARON Street Address (P.O. Box Number is Not Acceptable) 10611 MARIANNE LANE NEW PORT RICHEY FL 34654 City 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. I am familiar with, and accept the obligations of registered agent. 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 Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. 🔀 Delete TITLE TITLE Change ☐ Addition June Morse 622 Rayer Lane TELLER, DOUGLAS NAME NAME 5719 MERRIMAC DR STREET ADDRESS STREET ADDRESS Longboat Key, FL 34228 SARASOTA FL 34231 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change CURTIS, SHAROM NAME NAME 10611 MARIANNE LANE STREET ADDRESS STREET ADDRESS NEW PORT RICHEY FL 34654 CITY - ST - 7IP CITY-ST-ZIP 1VPD TITLE Delete TITLE Change ☐ Addition Charles Shapler 2380 World Parkway No. L Clearwater, FL 33763 MORSE, JUNE NAME NAME 622 RANGER LN STREET ADDRESS STREET ADDRESS LONGBOAT KEY FL 34228 CITY-ST-ZIP CITY-ST-ZIP ന Delete TITLE TITLE M Change ☐ Addition DOUGHERTY, CAROLE NAME NAME 3203 SWEETLEAF TERR. STREET ADDRESS STREET ADDRESS MOUNT LAUREL NJ 08054 CITY-ST-ZIP CITY-ST-ZIP ton, FL 34217 ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

SIGNATURE:

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.

Sharon Curtis 4/30/04 727-863-8103

FILED