

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2008 8:00 am
Secretary of State

04-18-2008 90042 022 ****61.25

DOCUMENT # N25027

1. Entity Name

CHARLOTTE PORCELAIN ARTISTS, INC.



Principal Place of Business

5281 EDEN CT
NORTH PORT FL 34287

Mailing Address

5281 EDEN CT
NORTH PORT FL 34287



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/07)

City & State

City & State

4. FEI Number

59-2106573

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SCHRUNK, JOYCE
5281 EDEN CT
NORTH PORT FL 34287

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Joyce Schunk

Joyce Schunk

4-1-08

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
Due By: May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DESROSEIRS, FLORINGE 26124 FEATHERSOUND DR. PUNTA GORDA FL 33950	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JAMES, CAROLYN 3701 BAYNARD DR PUNTA GORDA FL 33950	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SCHRUNK, JOYCE 5281 EDEN CT NORTH PORT FL 34287	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BRANDSTETTER, PAT 217 W TARPON BLVD PORT CHARLOTTE FL 33952	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Joyce Schunk 5281 EDEN CT North Port, FL 34287	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Brenda Barker 760 Michigan Ave. Englewood, FL 34223	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ruth Adams 29105 Alfaretta Ave. Punta Gorda, FL 33982	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Joyce Schunk

4/1/08

941-423-8101

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Customer Expense #