

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28296

FILED
Jul 13, 2009
Secretary of State

Entity Name: THE DOUGLAS ANDERSON SCHOOL OF THE ARTS FOUNDATION, INC.

Current Principal Place of Business:

231 EAST ADAMS ST.
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

231 EAST ADAMS ST.
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 59-3033011 **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:

Name and Address of New Registered Agent:

DUNN, JEFFREY D.
231 EAST ADAMS ST.
JACKSONVILLE, FL 32202 US

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: PD () Delete
Name: DUNN, JEFFREY D.
Address: 231 EAST ADAMS ST.
City-St-Zip: JACKSONVILLE, FL 32202

Title: VD () Delete
Name: BAKER, ANN
Address: 4915 MORVEN ROAD
City-St-Zip: JACKSONVILLE, FL 32210

Title: TD () Delete
Name: BRYAN, J. SHEPARD JR.
Address: 1651 BEACH AVENUE
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: SD () Delete
Name: CORNELIUS, JACKIE
Address: 2445 SAN DIEGO RD.
City-St-Zip: JACKSONVILLE, FL 32207

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: JEFFREY D. DUNN

PD

07/13/2009

Electronic Signature of Signing Officer or Director

Date