2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35161

FILED Jan 17, 2009 Secretary of State

Entity Name: ARTIST'S GUILD OF ANNA MARIA ISLAND, INC. **New Principal Place of Business: Current Principal Place of Business:** 5414 MARINA DR HOLMES BCH, FL 34217 **Current Mailing Address: New Mailing Address:** 5414 MARINA DR HOLMES BCH, FL 34217 FEI Number: 65-0206090 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CASH, LESLIE K 221 CHILSON AVE ANNA MARIA, FL 34216 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete VOYLES, JOAN Name: Name: Address: 517 LAQUAT DRIVE Address: City-St-Zip: ANNA MARIA, FL 34216 City-St-Zip: Title: Title: () Delete () Change () Addition Name: CASH, LESLIE Name: Address: 221 CHILSON AVE. Address: City-St-Zip: ANNA MARIA, FL 34216 City-St-Zip: Title: () Delete Title: (X) Change () Addition JUDITH, STROM Name: MIDGE, PIPPEL Name: 3860 CATALINA DR. Address: Address: 212 84TH STREET City-St-Zip: BRADENTON, FL 34210 City-St-Zip: HOLMES BEACH, FL 34217

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: LESLIE K. CASH T 01/17/2009