2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35772

FILED Apr 17, 2007 Secretary of State

Entity Name: ANNA MARIA ISLAND ARTS LEAGUE, INC.

Current Principal Place of Business:		New Principal Place of Business:	
5312 HOLMES BLVD. HOLMES BEACH, FL 342	217 US		
Current Mailing Address:		New Mailing Address:	
5312 HOLMES BLVD. HOLMES BEACH, FL 342	217 US		
FEI Number: 65-0170517	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:	
KARP, JOYCE 5312 HOLMES BLVD. HOLMES BEACH, FL 342	217 US		
The above named entity s in the State of Florida.	ubmits this statement for the	purpose of changing its registered	office or registered agent, or both,
SIGNATURE:			
Electroni	ic Signature of Registered Ag	ent	Date

OFFICERS AND DIRECTORS:

HOLMES BEACH, FL 34217

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PD () Delete PD (X) Change () Addition BISHOP, PATTI BISHOP, PATTI Name: Name: Address: 31 FOXWORTH LN Address: 631 FOXWORTH LN City-St-Zip: HOLMES BEACH, FL 34217 City-St-Zip: HOLMES BEACH, FL 34217 Title: () Delete Title: (X) Change () Addition MCGEARY, LAURA MCGEARY, LAURA Name: Name: Address: 202 IRIS ST W PO BOX 310 Address: 3406 4TH AVE W City-St-Zip: ANNA MARIA, FL 34216 City-St-Zip: BRADENTON, FL 34205 Title: () Delete Title: () Change () Addition BRAUN, MIDGE Name: Name: 508 72ND STREET Address: Address: City-St-Zip: BRADENTON BEACH, FL 34217 City-St-Zip: Title: Title: () Delete () Change () Addition KARP, JOYCE Name: Name: 502 75TH ST Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: JOYCE KARP D 04/17/2007