

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N37218

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** THE MARY BROGAN MUSEUM OF ART AND SCIENCE, INC.

**Current Principal Place of Business:**

350 S DUVAL STREET  
TALLAHASSEE, FL 32301 US

**New Principal Place of Business:**

**Current Mailing Address:**

350 S DUVAL STREET  
TALLAHASSEE, FL 32301 US

**New Mailing Address:**

**FEI Number:** 59-3013279      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BARBER, CHUCHA DIR.  
350 SOUTH DUVAL STREET  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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: SEC  
Name: BERRIAN, SHARON  
Address: PO BOX 1757  
City-St-Zip: TALLAHASSEE, FL 32301

Title: P  
Name: MICA, DAVE  
Address: 1262 MILLSTREAM  
City-St-Zip: TALLAHASSEE, FL 32312

Title: TRES  
Name: LEONARD, DEBORAH  
Address: 10100 VETERANS MEMORIAL DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

I hereby 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 all other like empowered.

SIGNATURE: CHUCHA BARBER

DIR

04/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date