

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2004 8:00 am
Secretary of State

03-22-2004 90041 033 ****61.25

DOCUMENT # N41098

1. Entity Name
BRAVO CENTER FOR THE ARTS, INC.



Principal Place of Business
7200 US HIGHWAY 19 NORTH
#726
PINELLAS PARK, FL 33781 US

Mailing Address
% BEA NASIADKA
P.O. BOX 40088
ST PETERSBURG, FL 33743 US

54021068



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03092004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-3145166

Applied For
Not Applicable

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

NASIADKA, BEA
11969 MURRAY AVE
LARGO, FL 33778

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

Bea Nasiadka

Bea Nasiadka

3-18-04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

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 PD
NAME NASIADKA, BEA
STREET ADDRESS 11969 MURRAY AVE
CITY-ST-ZIP LARGO, FL 33778 ☒ Delete (change)

TITLE VPD
NAME STEWART, TERESA
STREET ADDRESS 6555 8TH AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG, FL 33710 ☒ Delete

TITLE MSD
NAME SIEGEL, ELLEN J
STREET ADDRESS 4666 8TH AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG, FL 33713 ☐ Delete

TITLE TD
NAME BOWMAN, SANDRA
STREET ADDRESS 10190 125TH ST N
CITY-ST-ZIP SEMINOLE, FL 33772 ☐ 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 Executive Director
NAME NASIADKA, BEA
STREET ADDRESS 11969 Murry Ave
CITY-ST-ZIP Largo, FL 33778 ☒ Change ☐ Addition

TITLE PD
NAME William Hammesfahr
STREET ADDRESS 16110 - 5th Street East
CITY-ST-ZIP Redington Beach, FL 33708 ☐ Change ☒ Addition

TITLE VPD
NAME Mary ANYAN
STREET ADDRESS 1800 Follow-Thru Rd North
CITY-ST-ZIP St. Pete, FL 33710 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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 exemption stated in Section 119.07(3)(i), 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:

Bea Nasiadka

Bea Nasiadka

3-18-04

Date

Daytime Phone #

727

584-5920