

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2005
Secretary of State

DOCUMENT# N43938

Entity Name: PINELLAS COUNTY ARTS COUNCIL FOUNDATION, INC.

Current Principal Place of Business:

14700 TERMINAL BLVD
STE 229
CLEARWATER, FL 33762 US

New Principal Place of Business:

Current Mailing Address:

14700 TERMINAL BLVD
STE 229
CLEARWATER, FL 33762 US

New Mailing Address:

FEI Number: 59-3081722 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWERS, JUDITH B.
14700 TERMINAL BLVD
STE 229
CLEARWATER, FL 33762 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: D () Delete
Name: CASTAGLIOLA, PAUL
Address: 14700 TERMINAL BLVD., STE. 229
City-St-Zip: CLEARWATER, FL 33762

Title: PD () Delete
Name: ROUSE, JANICE
Address: 14700 TERMINAL BLVD., STE. 229
City-St-Zip: CLEARWATER, FL 33762

Title: D () Delete
Name: RISSER, FRANCES
Address: 14700 TERMINAL BLVD., STE. 229
City-St-Zip: CLEARWATER, FL 33762

Title: SD () Delete
Name: POWERS, JUDITH
Address: 14700 TERMINAL BLVD., STE 229
City-St-Zip: CLEARWATER, FL 33762

Title: VP () Delete
Name: KLEINE, DALE
Address: 14700 TERMINAL BLVD., STE 229
City-St-Zip: CLEARWATER, FL 33762

Title: TD () Delete
Name: HUBBARD, BARBARA C
Address: 14700 TERMINAL BLVD., STE. 229
City-St-Zip: CLEARWATER, FL 33762

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:

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 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 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: DALE KLEINE

VP

01/26/2005

Electronic Signature of Signing Officer or Director

_____ Date