## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N43938

FILED Jan 26, 2005 Secretary of State

Entity Name: PINELLAS COUNTY ARTS COUNCIL FOUNDATION, INC.

| Current Principal Place of Business:  |  | New Principal Place   | New Principal Place of Business:   |  |
|---|--|---|--|--|
| 14700 TEF<br>STE 229  | RMINAL BLVD  |   |  |  |
|   | ATER, FL 33762 US  |   |  |  |
| Current Mailing Address:  |  | New Mailing Address   | New Mailing Address:   |  |
|   | RMINAL BLVD  |   |  |  |
| STE 229<br>CLEARW <i>A</i>  | ATER, FL 33762 US  |   |  |  |
|   | : 59-3081722 FEI Number Applied For ( )  | FEI Number Not Applicable ( )   | Certificate of Status Desired ( )  |  |
| lame and  | Address of Current Registered Agent:   | Name and Address o  | of New Registered Agent:   |  |
| OWERS,  | JUDITH B.  |   |  |  |
|   | RMINAL BLVD  |   |  |  |
| — — —   | ATER, FL 33762 US  |   |  |  |
|   | named entity submits this statement for the  | e purpose of changing its registere   | d office or registered agent, or both,   |  |
|   | e of Florida.  |   |  |  |
| SIGNATUF  | RE:Electronic Signature of Registered A  | .gent   | <br>Date   |  |
| SELCED  | S AND DIRECTORS:   |   |  |  |
| PERICER   | S AND DIRECTORS:   | ADDITIONS/CHANG   | ES TO OFFICERS AND DIRECTOR  |  |
|   |  |   |  |  |
|   | D () Delete<br>CASTAGLIOLA, PAUL   | Title:<br>Name:   | ( ) Change ( ) Addition  |  |
| lame:   | D ( ) Delete<br>CASTAGLIOLA, PAUL<br>14700 TERMINAL BLVD., STE. 229  | Title:<br>Name:<br>Address:   | ( ) Change ( ) Addition  |  |
| lame:<br>.ddress:   | CASTAGLIOLA, PAUL  | Name:   | ( ) Change ( ) Addition  |  |
| lame:<br>.ddress:<br>bity-St-Zip:<br>itle:  | CASTAGLIOLA, PAUL<br>14700 TERMINAL BLVD., STE. 229<br>CLEARWATER, FL 33762<br>PD () Delete  | Name:<br>Address:<br>City-St-Zip:<br>Title:   | ( ) Change ( ) Addition ( ) Change ( ) Addition  |  |
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| lame: .ddress: bity-St-Zip: itle: lame: .ddress:  | CASTAGLIOLA, PAUL<br>14700 TERMINAL BLVD., STE. 229<br>CLEARWATER, FL 33762<br>PD () Delete  | Name:<br>Address:<br>City-St-Zip:<br>Title:   |  |  |
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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