

2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT

FILED

Apr 01, 2005 08:00 AM  
Secretary of State

DOCUMENT # N46237

1. Entity Name

MINIATURE ARTISTS OF AMERICA, INC.



Principal Place of Business

1595 N. PEACEFUL LANE  
CLEARWATER, FL 34616

Mailing Address

1595 N. PEACEFUL LANE  
CLEARWATER, FL 33756 US



03212005 No Chg-NP

CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3098958

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

PETRYSZAK, KAY  
1595 N. PEACEFUL LANE  
CLEARWATER, FL 34616

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IN THIS SPACE

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

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, 2005

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D  
NAME PETRYSZAK, KAY  
STREET ADDRESS 1595 N. PEACEFUL LANE  
CITY-STATE-ZIP CLEARWATER, FL

TITLE D  
NAME PALMER, SUSAN  
STREET ADDRESS 50 COE RD. #233  
CITY-STATE-ZIP BELLEAIR, FL 33756

TITLE D  
NAME LAIRD-LAGASSEE, JANET  
STREET ADDRESS 43 ELM WOOD RD  
CITY-STATE-ZIP AUBURN, ME 042106509

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

U00000283766  
04/01/05-80042-001 61.25

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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

*Kay Petryszak*

3-30-05 (427) 584-3883