

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47507

FILED  
Feb 15, 2012  
Secretary of State

**Entity Name:** PAINT YOUR HEART OUT SAFETY HARBOR, INC.

**Current Principal Place of Business:**

P. O. BOX 1131  
SAFETY HARBOR, FL 34695 US

**New Principal Place of Business:**

1680 ENSLEY AVE  
SAFETY HARBOR, FL 34695 US

**Current Mailing Address:**

PO BOX 1131  
SAFETY HARBOR, FL 34695 US

**New Mailing Address:**

**FEI Number:** 59-3110096      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BURGHARDT, LYNNE A TREASUR  
1680 ENSLEY AVE  
SAFETY HARBOR, FL 34695 US

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

BURGHARDT, LYNNE A TREASUR  
1680 ENSLEY AVE  
SAFETY HARBOR, FL 34695 US

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

02/15/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: BEHRLE, DAVID  
Address: 175 WOODCREEK DR. W.  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: S  
Name: MOYNIHAN, PAULA  
Address: 3543 HIGHWAY TO BAY BLVD  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D  
Name: BACHTELER, CHARLES  
Address: 5035 EDGEWATER LANE  
City-St-Zip: OLDSMAR, FL 34677

Title: P  
Name: NICKESON, NADINE  
Address: 280 TUCKER ST  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: T  
Name: BURGHARDT, LYNNE  
Address: 1680 ENSLEY AVE  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D  
Name: MUNROE, STUB  
Address: 980 MAINST.  
City-St-Zip: SAFETY HARBOR, FL 34695 US

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: LYNNE BURGHARDT

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02/15/2012

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

\_\_\_\_\_  
Date