

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 16, 2008 8:00 am**  
**Secretary of State**

01-16-2008 90018 036 \*\*\*\*70.00

**DOCUMENT # N93000003906**

1. Entity Name  
**DUVAL ART TEACHERS ASSOCIATION, INC.**



Principal Place of Business  
**1701 PRUDENTIAL DRIVE  
3RD FLR., RM 315  
JACKSONVILLE, FL 32207 US**

Mailing Address  
**1701 PRUDENTIAL DRIVE  
3RD FLR., RM 315  
JACKSONVILLE, FL 32207 US**



2. Principal Place of Business - No P.O. Box #  
**1701 Prudential Drive**

Suite, Apt. #, etc.  
**6th Floor room 606**

City & State  
**Jacksonville**

Zip  
**32207**

Country  
**DUVAL**

3. Mailing Address  
**1701 Prudential Drive**

Suite, Apt. #, etc.  
**6th Floor room 606**

City & State  
**Jacksonville**

Zip  
**32207**

Country  
**Duval**

01112008 Chg-NP CR2E037 (12/06)

4. FEI Number  
**59-3224472**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**MATTHEWS, JACK  
1701 PRUDENTIAL DRIVE  
3RD FLR., RM 315  
JACKSONVILLE, FL 32207**

**7. Name and Address of New Registered Agent**

Name  
**change to**

Street Address (P.O. Box Number is Not Acceptable)  
**6th floor Room 606**

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 **ALYCE WALCAVICH** *Alyce Walcavich* **1/14/08**

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, 2008**

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 NAME STREET ADDRESS CITY-ST-ZIP	DS WRIGHT, PATTI G 12621 SAND RIDGE DR. JACKSONVILLE, FL 32258	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EVANS, JUDITH 633 2ND AVE. JACKSONVILLE BEACH, FL 32225	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SNEAD, JENNIFER F 8532 VERMANTH RD JACKSONVILLE, FL 32211	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT WALCAVICH, ALYCE E 212 SPRINGWOOD LN JACKSONVILLE, FL 32259	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Jennifer Snead 8532 Vermanth Rd. Jacksonville, FL 32211	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Dana Johnson 452 Myra St Jacksonville, FL 32266	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 **ALYCE WALCAVICH** *Alyce Walcavich* **Treasurer** **1/14/08**

(ALYCE WALCAVICH)