

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

3/12/2007-90365-036-\$70.00-\$70.00

FILED

2007 DEC 10 PM 11:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT

CR2E037 (12/06)

07

DOCUMENT # N94000003826			
1. Entity Name THE OCALA ART GROUP, INC.			
Principal Place of Business APPLETON MUSEUM 4333 NE SILVER SPRINGS BLVD. PO BOX 3190 OCALA, FL 34470 US		Mailing Address P.O. BOX 314 OCALA, FL 34478-0314 US	
2. Principal Place of Business - No P.O. Box # Marion County Library		3. Mailing Address PO Box 314	
Suite, Apt. #, etc. 2720 E Silver Springs Blvd		Suite, Apt. #, etc.	
City & State Ocala FL		City & State Ocala FL 34478	
Zip 34470	Country	Zip 34478-0314	Country USA
4. FEI Number 59-3274754		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GAMBLE, MARIANNE 6715 NW 63RD AVE GAINESVILLE, FL 32653		7. Name and Address of New Registered Agent Name Mary Trowbridge Street Address (P.O. Box Number is Not Acceptable) 12962 SE 91st Ct Summerfield City FL Zip Code 34491	
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 Mary Trowbridge DATE 3/08/07 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
Filing Fee is \$61.25 Due by May 1, 2007		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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. KERR, BARBARA 3411 S. GROVE TERR INVERNESS, FL 34450 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. Mary L. Trowbridge 12962 SE 91st Court Summerfield FL 34491 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T GAMBLE, MARIANNE 6718 NW 63RD AVE GAINESVILLE, FL 32653 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Barbara Batchelder 1755 SE 15th St Summerfield, FL 34491 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SIMMER, CAROLE P.O. BOX 771086 OCALA, FL 344771086 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Judith Eberle 9662 SE 71st Court Ocala, FL 34472 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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.

Mary Trowbridge, President

12/13
aw