

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000620

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** THE ARTIST SERIES OF TALLAHASSEE, INC.

**Current Principal Place of Business:**

1897 CAPITAL CIRCLE NE  
SUITE 204  
TALLAHASSEE, FL 32308 US

**New Principal Place of Business:**

**Current Mailing Address:**

1897 CAPITAL CIRCLE NE  
SUITE 204  
TALLAHASSEE, FL 32308 US

**New Mailing Address:**

**FEI Number:** 59-3299905

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWN, JAMES W DR.  
1897 CAPITAL CIRCLE NE  
SUITE 204  
TALLAHASSEE, FL 32308 US

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

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BROWN, JAMES W DR.  
Address: 3001 BYINGTON CIRCLE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: VD  
Name: SPURGEON, PHILLIP  
Address: 2320 KARA DRIVE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: TR  
Name: BLANCETT, JUDY  
Address: 3142 N. SHANNON LAKES DRIVE  
City-St-Zip: TALLAHASSEE, FL 32309

Title: SC  
Name: DENSMORE, VIRGINIA  
Address: 9713 WATERS MEET DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

Title: ED  
Name: SOBODOWSKI, PAMELA M  
Address: 1811 HOOT OWL HILL  
City-St-Zip: TALLAHASSEE, FL 32317

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: PAMELA SOBODOWSKI

ED

04/20/2011

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

\_\_\_\_\_  
Date