

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004014

FILED
Jan 25, 2010
Secretary of State

Entity Name: RIVERSIDE FINE ARTS ASSOCIATION, INC.

Current Principal Place of Business:

1100 STOCKTON STREET
JACKSONVILLE, FL 32204

New Principal Place of Business:

1100 STOCKTON STREET
JACKSONVILLE, FL 32204 US

Current Mailing Address:

1100 STOCKTON STREET
JACKSONVILLE, FL 32204

New Mailing Address:

1100 STOCKTON STREET
JACKSONVILLE, FL 32204 US

FEI Number: 59-3357150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AUBREY, STACY B
1100 STOCKTON STREET
JACKSONVILLE, FL 32204 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: D
Name: BRINSON, DAVID A
Address: 4300 LAKESIDE DR. # 17
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: KNAUER, MARY B
Address: 4141 ORTEGA BLVD.
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: BUNKER, JOHN S
Address: 2834 GRAND
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: KRUEGER, ROSS T
Address: 4735 ORTEGA BLVD
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: DUNKLE, CATHLEEN
Address: 4823 APACHE AVE
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: WICKERSHAM, STEPHEN R
Address: 412 OAK POND DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

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: DAVID A. BRINSON

MR.

01/25/2010

Electronic Signature of Signing Officer or Director

Date