

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005317

FILED
Apr 29, 2005
Secretary of State

Entity Name: NORTHLAND FOUNDATION FOR THE ARTS AND EDUCATION, INC.

Current Principal Place of Business:

530 DOG TRACK ROAD
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

530 DOG TRACK ROAD
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 59-3347016

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRACEY, TIMOTHY
1111 ARDEN STREET
LONGWOOD, FL 32750 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 () Delete
Name: RAINWATER, VERNON
Address: 1019 SAPLING DR.
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D () Delete
Name: TRACEY, TIMOTHY
Address: 1111 ARDEN STREET
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TIMOTHY J. TRACEY

D

04/29/2005

Electronic Signature of Signing Officer or Director

Date