

NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90054 026 ****70.00

DOCUMENT # **N96000005758**

1. Entity Name
FLORIDA FINE ART MUSEUM CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1707 Winners Circle

Suite, Apt. #, etc.

3. Mailing Address

1707 Winners Circle

Suite, Apt. #, etc.

City & State

Tarpon Springs FL

City & State

Tarpon Springs FL

Zip

34689

Country

USA

Zip

34689

Country

USA

4. FEI Number

59-3434479

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Harcourt SYMS

Street Address (P.O. Box Number is Not Acceptable)

1707 Winners Circle

City

Tarpon Springs

FL

Zip Code

34689

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

Harcourt SYMS D.P. (Same)

(NOTE: Registered Agent signature required when reinstating)

March 28, 2002

DATE

FEE IS \$61.25

Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D.P.
NAME	SYMS, HARCOURT
STREET ADDRESS	1707 WINNERS CIRCLE
CITY-ST-ZIP	TARPO SPRINGS FL. 34689
TITLE	DVS
NAME	SYMS, FIONA C.
STREET ADDRESS	1707 WINNERS CIRCLE
CITY-ST-ZIP	TARPO SPRINGS, FL. 34689
TITLE	D.P.
NAME	BELDZIK SN. (NEE SYMS)
STREET ADDRESS	1707 WINNERS CIRCLE
CITY-ST-ZIP	TARPO SPRINGS FL. 34689
TITLE	
NAME	
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

Orig Signatures - as below
Harcourt Syms

11. I hereby certify that the information supplied with this filing does not qualify 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: **Harcourt Syms**

HARCOURT SYMS D.P.

(727)

March 28, 2002 934.3937

CR2F037B (12/01)