

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005762

FILED  
Jan 14, 2009  
Secretary of State

Entity Name: THE FRIENDS OF THE MUSEUMS, INC.

## Current Principal Place of Business:

139 SE MIRACLE STRIP PKWY  
FT WALTON BEACH, FL 32548 US

## New Principal Place of Business:

## Current Mailing Address:

139 SE MIRACLE STRIP PKWY  
FT WALTON BEACH, FL 32548

## New Mailing Address:

FEI Number: 59-3420895

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PEELE, ANNA  
640 PINE CONE CT  
MARY ESTHER, FL 32569 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: PEELE, ANNA  
Address: 640 PINE CONE CT  
City-St-Zip: MARY ESTHER, FL 32569

Title: D ( ) Delete  
Name: COMPOS, DENNIS  
Address: 334 MORGAN LANE  
City-St-Zip: MARY ESTHER, FL 32569

Title: TD ( ) Delete  
Name: SNOWBALL, ANGELA  
Address: 349 E BROOKS ST.  
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: SD ( ) Delete  
Name: BALANZATEQUI, PAT  
Address: 169 MONAHAN DR.  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: PD ( ) Delete  
Name: LUCAS, BILLY F  
Address: 333 PERMISSION ST.  
City-St-Zip: FREEPORT, FL 32439

Title: VD ( ) Delete  
Name: SEEVER, NELDA  
Address: 7159 SIESTA ST.  
City-St-Zip: NAVARRE, FL 32566

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change ( ) Addition  
Name: PEELE, ANNA  
Address: 640 PINE CONE CT  
City-St-Zip: MARY ESTHER, FL 32569

Title: D (X) Change ( ) Addition  
Name: JANSEN, JOHN  
Address: 357 N. EGLIN PARKWAY #205  
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D (X) Change ( ) Addition  
Name: SNOWBALL, ANGELA  
Address: 349 E BROOKS ST.  
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: V (X) Change ( ) Addition  
Name: BALANZATEQUI, PAT  
Address: 169 MONAHAN DR.  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: S (X) Change ( ) Addition  
Name: LUCAS, BILLY F  
Address: 333 PERMISSION ST.  
City-St-Zip: FREEPORT, FL 32439

Title: T (X) Change ( ) Addition  
Name: SEEVER, NELDA  
Address: 7159 SIESTA ST.  
City-St-Zip: NAVARRE, FL 32566

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ANNA PEELE

C

01/14/2009

Electronic Signature of Signing Officer or Director

Date