

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90003 030 ****61.25

DOCUMENT # N97000000238

1. Entity Name
CORAL SPRINGS MUSEUM OF ART, INC.



Principal Place of Business
**2855 CORAL SPRINGS DRIVE
CORAL SPRINGS, FL 33065**

Mailing Address
**2855 CORAL SPRINGS DRIVE
CORAL SPRINGS, FL 33065**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01032007 Chg-NP CR2E037 (12/06)

4. FEI Number
65-0747980

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GOREN, SAMUEL S
JOSIAS & GOREN, P.A.
3099 EAST COMMERCIAL BLVD., SUITE 200
FORT LAUDERDALE, FL 33308**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

T ☐ Delete
NAME **HARRISON, DAVID**
STREET ADDRESS **11088 NW 14TH ST**
CITY-ST-ZIP **CORAL SPRINGS, FL 33071**

D ☒ Delete
NAME **KUHN, KERRY DR**
STREET ADDRESS **10002 VESTAL PLACE**
CITY-ST-ZIP **CORAL SPRINGS, FL 33071**

D ☐ Delete
NAME **OPLER, STEVE**
STREET ADDRESS **11901 SW 2ND STREET**
CITY-ST-ZIP **PLANTATION, FL 333252821**

~~EDPC~~ ☒ Delete
NAME **BRITE, PAUL**
STREET ADDRESS **10197 RAMBLEWOOD DRIVE**
CITY-ST-ZIP **CORAL SPRINGS, FL 33071**

☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VICE PRESIDENT
JOCELYN CARTER-MILLER ☐ Change ☒ Addition
8701 BANYAN COURT
TAMARAC, FL 33321

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PRESIDENT ☐ Change ☒ Addition
BLADEM, PAUL
6508 NW 103 LANE
PARKLAND, FLA 33076

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/26/07 954 340 5000