

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002765

FILED
Apr 20, 2009
Secretary of State

Entity Name: FLORIDA ART THERAPY ASSOCIATION, INC.

Current Principal Place of Business:

20976 AVENEL RUN
BOCA RATON, FL 33248

New Principal Place of Business:

Current Mailing Address:

20976 AVENEL RUN
BOCA RATON, FL 33248

New Mailing Address:

FEI Number: 65-0789743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIEGEL, CRAIG A
20976 AVENEL RUN
BOCA RATON, FL 33248 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: T () Delete
Name: SIEGEL, CRAIG A
Address: 20976 AVENEL RUN
City-St-Zip: BOCA RATON, FL 33248

Title: P () Delete
Name: WASSERMAN, LISA
Address: 14811 ARCHER HALL STREET
City-St-Zip: DAVIE, FL 33331

Title: S () Delete
Name: CHESONIS-GONZALEZ, MORGEN
Address: 20525 MARLIN ROAD
City-St-Zip: MIAMI, FL 33189

Title: V () Delete
Name: FARRELL-KIRK, RAQUEL
Address: 18129 SW 3RD STREET
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: WASSERMAN, LISA
Address: 14811 ARCHER HALL STREET
City-St-Zip: DAVIE, FL 33331

Title: V (X) Change () Addition
Name: SCHEIBEL, POPPY
Address: 1720 ALTA VISTA STREET
City-St-Zip: SARASOTA, FL 34236

Title: P (X) Change () Addition
Name: FARRELL-KIRK, RAQUEL
Address: 18129 SW 3RD STREET
City-St-Zip: PEMBROKE PINES, FL 33029

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: CRAIG SIEGEL

T

04/20/2009

Electronic Signature of Signing Officer or Director

Date