

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004950

FILED  
Mar 06, 2012  
Secretary of State

**Entity Name:** FROSTPROOF ART LEAGUE AND GALLERY, INC.

**Current Principal Place of Business:**

12 EAST WALL STREET  
FROSTPROOF, FL 33843

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 654  
FROSTPROOF, FL 33843 US

**New Mailing Address:**

**FEI Number:** 59-3473603

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

NEHER, MARTHA M  
108 CHESNEY BLVD  
FROSTPROOF, FL 33843 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: V P  
Name: FULLER, GERALD L  
Address: 347 CALOOSA CT  
City-St-Zip: LAKE WALES, FL 32859

Title: T  
Name: BRUEGGEMANN, LUETTA R  
Address: 27 ELKHORN DR  
City-St-Zip: FROSTPROOF, FL 33843

Title: D  
Name: WILSON, PATRICIA S  
Address: 12 E WALL ST  
City-St-Zip: FROSTPROOF, FL 33843

Title: D  
Name: FULLER, MARILYN K  
Address: 347 CALOOSA COURT  
City-St-Zip: LAKE WALES, FL 33859

Title: S  
Name: REEDER, GAYLE  
Address: 401 ALDO ROAD  
City-St-Zip: BABSON PARK, FL 33827

Title: P  
Name: NEHER, MARTHA M  
Address: 108 CHESNEY BLVD  
City-St-Zip: FROSTPROOF, FL 33843 PO

I hereby 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 all other like empowered.

SIGNATURE: MARTHA M. NEHER

P

03/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date