

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 07, 2008 8:00 am**  
**Secretary of State**

04-07-2008 90035 046 \*\*\*\*61.25

**DOCUMENT # N97000006671**

1. Entity Name

SANTA ROSA ART ASSOCIATION, INC.



Principal Place of Business

P.O. BOX 4256  
MILTON FL 32572

Mailing Address

P.O. BOX 4256  
MILTON FL 32572



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

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-3492481

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEMPSEY, JANICE  
8771 HICKORY HAMMOCK RD  
MILTON FL 32583

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

*Janice Dempsey, Tres.*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3-24-08

**FILE NOW: FEE IS \$61.25**  
**Due By: May 1, 2008**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME PESCHEL, NAITA  
STREET ADDRESS 5055 JERRY LN  
CITY-ST-ZIP PACE FL 32571 ☒ Delete

TITLE PD  
NAME Nearty, Dianna  
STREET ADDRESS 5936 Starlite Ln.  
CITY-ST-ZIP Milton FL 32570 ☒ Change ☐ Addition

TITLE T  
NAME DEMPSEY, JANICE  
STREET ADDRESS 8771 HICKORY HAMMOCK RD  
CITY-ST-ZIP MILTON FL 32583 ☐ Delete

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

TITLE SD  
NAME SEAL, JANIE  
STREET ADDRESS 5697 ENGLISH TURN DR  
CITY-ST-ZIP PACE FL 32571 ☒ Delete

TITLE SD  
NAME Borges Suzanne  
STREET ADDRESS 5547 Woodridge Dr.  
CITY-ST-ZIP Milton FL 32570 ☐ Change ☒ Addition

TITLE SD  
NAME LEAKIE, ANGIE  
STREET ADDRESS 7703 TRINITY CHURCH RD  
CITY-ST-ZIP MILTON FL 32570 ☒ Delete

TITLE S  
NAME Vaughan, Jeanie  
STREET ADDRESS 8649 Hickory Hammock Rd.  
CITY-ST-ZIP Milton FL 32583 ☒ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

*Janice K. Dempsey*

3-24-08 850-623-3711