

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005553

FILED
Apr 12, 2005
Secretary of State

Entity Name: THE STUDIO ART CENTER INC.

Current Principal Place of Business:

333 TRESSLER DR.
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

333 TRESSLER DR.
STUART, FL 34994

New Mailing Address:

FEI Number: 65-0879245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATHESON, MARLEE
5107 S.W. ANHINGA AVE.
PALM CITY, FL 34990 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: MATHESON, ROBERT H
Address: 5107 SW ANHINGA AVE
City-St-Zip: PALM CITY, FL 34990

Title: SVT () Delete
Name: MCNAUGHTON, PATTY
Address: 3800 WOOD AVE
City-St-Zip: MIAMI, FL 35133

Title: DSPT () Delete
Name: MATHESON, MARLEE
Address: 5107 SW ANHINGA AVE
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARLEE MATHESON

DSPT

04/12/2005

Electronic Signature of Signing Officer or Director

Date