

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004896

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** DELAND FALL FESTIVAL OF THE ARTS, INC.

**Current Principal Place of Business:**

100 N WOODLAND BLVD, SUITE 4  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

100 N WOODLAND BLVD, SUITE 4  
DELAND, FL 32720

**New Mailing Address:**

**FEI Number:** 59-3635388

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BECKER, JACK R  
100 N WOODLAND BLVD, SUITE 4  
DELAND, FL 32721 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:** DP  
**Name:** HARRIS, MARY BETH  
**Address:** 100 N WOODLAND BLVD, SUITE 4  
**City-St-Zip:** DELAND, FL 32720

**Title:** DS  
**Name:** THOMPSON, JUDY  
**Address:** 100 N WOODLAND BLVD, SUITE 4  
**City-St-Zip:** DELAND, FL 32720

**Title:** DVP  
**Name:** DONI, LENNON  
**Address:** 100 N WOODLAND BLVD, SUITE 4  
**City-St-Zip:** DELAND, FL 32720

**Title:** DC  
**Name:** PEADEN, TERROL  
**Address:** 100 N WOODLAND BLVD, SUITE 4  
**City-St-Zip:** DELAND, FL 32720

**Title:** DT  
**Name:** LAWRENCE, MARY ANN  
**Address:** 100 N WOODLAND BLVD, SUITE 4  
**City-St-Zip:** DELAND, FL 32720

**Title:** DVP  
**Name:** LISA, PETERSON  
**Address:** 100 N WOODLAND BLVD, SUITE 4  
**City-St-Zip:** DELAND, FL 32720 US

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:** DOROTHY DANSBERGER

D

01/05/2012

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

\_\_\_\_\_  
Date