## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000010563

Entity Name: MASTERWORKS ART GROUP, INC.

FILED Feb 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 1068 BUSINESS LANE #1
 20100 EAGLE GLEN WAY

 NAPLES, FL 34110
 US

 ESTERO, FL 33928
 US

Current Mailing Address: New Mailing Address:

P.O. BOX 112680 P.O. BOX 1829

NAPLES, FL 34108 US NAPLES, FL 34106 US

FEI Number: 65-0891251 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

IHRIG, W. KENT ESQUIRE

101 EAST KENNEDY BLVD.

SUITE 2800

TAMPA, FL 33602 US

IHRIG, W. KENT C ESQUIRE

101 EAST KENNEDY BLVD.

SUITE 2800

TAMPA, FL 33602 US

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: MICHAEL GENE WINDFELDT 02/19/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHMN ( ) Delete Title: CHMN (X) Change ( ) Addition Name: WINDFELDT, GENE WINDFELDT, GENE L

Address: 109 FELIPE DRIVE Address: 109 FELIPE DRIVE
City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134

Title: Title: () Delete (X) Change ( ) Addition WINDFELDT, MICHAEL Name: Name: WINDFELDT, MICHAEL G L 20100 EAGLE GLEN WAY 20100 EAGLE GLEN WAY Address: Address: ESTERO, FL 33928 ESTERO, FL 33928 City-St-Zip: City-St-Zip:

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition Name: WINDFELDT, GREGORY V WINDFELDT, GREGORY V

Name: WINDFELDT, GREGORY Name: WINDFELDT, GREGORY V
Address: 109 FELIPE DRIVE Address: 109 FELIPE DRIVE

City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL GENE WINDFELDT PRES 02/19/2009