

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

APPROVED  
 AND  
 FILED

97 NOV 12 AM 11:19

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

NONPROFIT  
 CORPORATION  
 ANNUAL REPORT  
 1997



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **737144** (6)  
 1. Corporation Name  
**FLORIDA ART EDUCATION ASSOCIATION, INCORPORATED**



Principal Place of Business Mailing Address  
**8128 25TH AVENUE NORTH** **P. O. BOX 11478**  
**ST. PETERSBURG FL 33710-9630** **ST PETE FL 33733-1478**  
**US** **US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 <b>952 Francis St.</b>		26 <b>P. O. Box 6038</b>		<b>10/26/1976</b>	<b>07/25/1996</b>
22 <b>West Palm Beach</b>		27 <b>West Palm Beach</b>		4. FEI Number	Applied For
City & State		City & State		<b>51-0182663</b>	Not Applicable
23 <b>Florida</b>		28 <b>Florida</b>		5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
Zip	Country	Zip	Country	6. Election Campaign Financing	<input type="checkbox"/> \$5.00 May Be Added to Fees
24 <b>33405</b>	25 <b>U.S.</b>	29 <b>33405</b>	30 <b>U.S.</b>	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>NURMELA, RALPH M</b> <b>8128 25TH AVENUE NORTH</b> <b>ST. PETERSBURG FL 33710</b>				81 Name	<b>Pearl Krepps</b>		
				82 Street Address (P.O. Box Number is Not Acceptable)	<b>952 Francis Street</b>		
				83 City	<b>West Palm Beach</b>		
				84 City	<b>West Palm Beach</b>	85 Zip Code	<b>FL 33405</b>

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE *Pearl Krepps* **Pearl Krepps, Treasurer** **11-5-97**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>ED</b> <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<b>D</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>NURMELA, RALPH M</b>	1.2 NAME	<b>Nancy Ingle-Krebsbach</b>
STREET ADDRESS	<b>8128 25TH AVENUE NORTH</b>	1.3 STREET ADDRESS	<b>858 Park Lake Court</b>
CITY-ST-ZIP	<b>ST. PETERSBURG FL</b>	1.4 CITY-ST-ZIP	<b>Orlando, Florida 32803-3908</b>
TITLE	<b>P</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>AZCUY, RAY T</b>	2.2 NAME	<b>50000234665--4</b>
STREET ADDRESS	<b>185 NW 164TH AVENUE</b>	2.3 STREET ADDRESS	<b>-11/13/97--01080--006</b>
CITY-ST-ZIP	<b>PEMBROKE PINES FL</b>	2.4 CITY-ST-ZIP	<b>*****61.25 *****61.25</b>
TITLE	<b>SD</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>MILES, PATRICIA A</b>	3.2 NAME	
STREET ADDRESS	<b>1427 HARNDEN ROAD</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>PORT ORANGE FL</b>	3.4 CITY-ST-ZIP	
TITLE	<b>TD</b> <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KREPPS, PEARL</b>	4.2 NAME	
STREET ADDRESS	<b>952 FRANCIS STREET</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>WEST PALM BCH. FL</b>	4.4 CITY-ST-ZIP	
TITLE	<b>S</b> <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>WILLIAMS, MAUNAN</b>	5.2 NAME	
STREET ADDRESS	<b>385 GROUSE COURT</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>WINTER PARK FL</b>	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Pearl Krepps* **Pearl Krepps, Treasurer** **11-5-97**

CR2E037 (4/97)

To: Whom It Might Concern  
From: Pearl Krepps, Treasurer  
Florida Art Education Assn.  
Date: November 5, 1997  
Subject: Nonprofit Corporation Annual Report

On June 18, 1997, I mailed the nonprofit corporation annual report for the Florida Art Education Association and included a check for \$61.25. I did not get a cancelled check back in the next bank statement so I called (Andy) regarding the check. Andy informed me that your office had received the application but it had been returned for another signature on line 11. He said it had been returned to:

Pearl Krepps  
P.O. Box 11478  
West Palm Beach, Florida 33405

At that time I told him that the address was wrong. Your office sent it to a St. Pete Post Office box number in West Palm Beach. I requested that when the letter was returned to your office that it be resent to the correct address. The correct address is listed under number 2 and again under number 10. To date I have not received any correspondence until yesterday. Upon calling again, the girl who answered the phone suggested that I write a letter and reissue the check.

Enclosed is a copy of the original document that was filed in June and a second notice along with a check. Please send all future correspondence to either 952 Francis Street or P.O. Box 6038, West Palm Beach, Florida 33405. The organization is no longer using either St. Petersburg address.

Thank you. Should you need further information, please call me at my work number (561) 434-8161.