

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90539 022 ****61.25

DOCUMENT # 737144

1. Entity Name

FLORIDA ART EDUCATION ASSOCIATION, INCORPORATED

Principal Place of Business

Mailing Address

1427 HARNDEN ROAD
 SUITE 1
 PORT ORANGE FL 32129
 US

1427 HARNDEN ROAD
 SUITE 1
 PORT ORANGE FL 32129
 US

00004020

2. Principal Place of Business

3. Mailing Address

~~P.O. Box~~ 12154 Capri Circles

P.O. Box 7452

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
 Treasure Island, FL

City & State
 Seminole, FL

4. FEI Number
 51-0182663

Applied For
 Not Applicable

Zip
 33704-FL

Country
 Pinellas

Zip
 33775

Country
 Pinellas

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

MILES, PATRICIA
 1427 HARNDEN ROAD
 SUITE 1
 PORT ORANGE FL 32828

Name Susan Froemming
 Street Address (P.O. Box Number is Not Acceptable)
 12154 Capri Circles
~~Treasure Island,~~
 City Treasure Island FL Zip Code 33706

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.

SIGNATURE *Susan Froemming*

4/23/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	WEINSTOCK, SUSAN	PO BOX 501	SORRENTO FL 32778	<input checked="" type="checkbox"/>
PDE	WILLIAMS, NAN	385 GROUSE COURT	WINTER PARK FL 32789	<input checked="" type="checkbox"/>
TD	MILES, PATRICIA	1427 HARNDEN RD	PORT ORANGE FL 21119	<input checked="" type="checkbox"/>
SD	JESUP, CINDY	721 PRISSOL LANE	PORT ORANGE FL 32127	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
Treasurer	Susan Froemming	12154 Capri Circles	Treasure Island, FL 33706	<input type="checkbox"/>	<input checked="" type="checkbox"/>
President Elect	Pearl Krepps	952 Francis St.	West Palm Beach, FL 33405	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Secretary	Ruth Ann Broddy	3012 Oak Hammock Ln	Tallahassee, FL 32301	<input type="checkbox"/>	<input checked="" type="checkbox"/>
President	Nan Williams	385 Grouse Ct	Winter Park FL 32789	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

CR2E037 (9/01)

12. I 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 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: *Susan Froemming*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/02 727-588-6057
 Date Daytime Phone #