

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 737144

**FILED**  
**Feb 11, 2019**  
**Secretary of State**  
**8500297430CC**

**Entity Name:** FLORIDA ART EDUCATION ASSOCIATION, INCORPORATED

**Current Principal Place of Business:**

402 OFFICE PLAZA  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

402 OFFICE PLAZA  
TALLAHASSEE, FL 32301 US

**FEI Number:** 51-0182663

**Certificate of Status Desired:** No

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

SANZ, KATHLEEN D  
402 OFFICE PALZA  
TALLAHASSEE, FL 32301 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	M
Name	SANZ, KATHLEEN D
Address	402 OFFICE PLAZA
City-State-Zip:	TALLAHASSEE FL 32301
Title	PRESIDENT
Name	LARK, KEELER
Address	2769 NE 30TH AVE APT 2
City-State-Zip:	LIGHTHOUSE POINT FL 33064

Title	PAST PRESIDENT
Name	CRANE, NICOLE
Address	1605 S US HWY ONE B106
City-State-Zip:	JUPITER FL 33477
Title	PRESIDENT ELECT
Name	HENSON-DACEY, JACKIE
Address	2811 POPPY RD.
City-State-Zip:	SARASOTA FL 34293

*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:** KATHLEEN D. SANZ

**REGISTERED AGENT**

**02/11/2019**

Electronic Signature of Signing Officer/Director Detail

Date