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: HENRY T MASON

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# 765245

Entity Name: ARTS COUNCIL OF VOLUSIA COUNTY, INC.

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

900 SMOKERISE BLVD PORT ORANGE, FL 32127

Current Mailing Address:

P.O. BOX 290850 PORT ORANGE, FL 32129 US

FEI Number: 59-2245895

Name and Address of Current Registered Agent:

MASON, HENRY T 900 SMOKERISE BLVD. PORT ORANGE, FL 32127 US

Date

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	PD	Title	TD
Name	MASON-TEAGUE, STEPHANIE	Name	MASON, HENRY T
Address	170 ORCHARD LANE	Address	900 SMOKERISE BLVD.
City-State-Zip:	ORMOND BEACH FL 32176	City-State-Zip:	PORT ORANGE FL 32127
		- :	
Title	SD	Title	VP
Title Name	SD JACKMAN, LUCY	Title Name	VP MILES, PAT
	-		

TREASURER

03/20/2020

Date