

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000006793

**Entity Name:** CONSERVATION ARTS INC.

**Current Principal Place of Business:**

1617 ALFORD PLACE  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

PO BOX 12285  
GAINESVILLE, FL 32604 US

**FEI Number: 82-2064334**

**Certificate of Status Desired: No**

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

CAREY, CATHERINE WARD  
1617 ALFORD PLACE  
JACKSONVILLE, FL 32207 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: CATHERINE WARD CAREY**

**04/28/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT,  
SECRETARY, TREASURER  
Name CAREY, CATHERINE WARD  
Address 1617 ALFORD PLACE  
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR  
Name CAREY, JANE ANNE  
Address 1315 N.E. 13TH STREET  
City-State-Zip: GAINESVILLE FL 32609

Title DIRECTOR  
Name GRIFFIN, ASHLEY MAY  
Address 1541 SILVER STREET  
City-State-Zip: JACKSONVILLE FL 32206

Title DIRECTOR  
Name SAWYER, ALEXANDER DUNCAN  
Address 5054 PIRATES COVE ROAD  
City-State-Zip: JACKSONVILLE FL 32210

Title DIRECTOR  
Name WALKER, BRADLEY SHANE  
Address 1541 SILVER STREET  
City-State-Zip: JACKSONVILLE FL 32206

Title DIRECTOR  
Name SAWYER, ASLIN CRAFT  
Address 5054 PIRATES COVE ROAD  
City-State-Zip: JACKSONVILLE FL 32210

Title DIRECTOR  
Name BOECKLEN, KARL ERICH  
Address 1617 ALFORD PLACE  
City-State-Zip: JACKSONVILLE FL 32207

*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: CATHERINE CAREY**

**DPST**

**04/28/2020**

Electronic Signature of Signing Officer/Director Detail

Date