

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18020

Entity Name: THE ARMORY ART CENTER, INC.**Current Principal Place of Business:**811 PARK PLACE
WEST PALM BEACH, FL 33401**Current Mailing Address:**811 PARK PLACE
WEST PALM BEACH, FL 33401 US**FEI Number:** 59-2808612**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PEARSON, TOM PHD
ARMORY ART CENTER, INC.
811 PARK PLACE
WEST PALM BEACH, FL 33401 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:** TOM PEARSON

01/13/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	D, VP	Title	EXECUTIVE DIRECTOR
Name	LAMBRECHT, NANCY	Name	PEARSON, TOM
Address	143 ROTUNDA DR	Address	811 PARK PLACE
City-State-Zip:	JUPITER FL 33477	City-State-Zip:	WEST PALM BEACH FL 33401
Title	SECRETARY, DIRECTOR	Title	TD
Name	KRAVECAS, MARIE ADLER	Name	WECHSLER, ROBERT
Address	811 PARK PLACE	Address	3450 S. OCEAN BLVD., APT. 717
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	PALM BEACH FL 33480
Title	CHAIRMAN, DIRECTOR	Title	PRESIDENT, DIRECTOR
Name	SILPE, LINDA FISHER	Name	VESELSKY, DAVID
Address	811 PARK PLACE	Address	811 PARK PLACE
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401

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: TOM PEARSON

EXECUTIVE DIRECTOR

01/13/2017

Electronic Signature of Signing Officer/Director Detail

Date