Current Prir 350 S DUVAL S TALLAHASSEE			
Current Mai	ling Address:		
350 S DUVA TALLAHASS	L STREET SEE, FL 32301 US		
FEI Number: 59-3013279		Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:		
NOWELS, FELI 350 SOUTH DL TALLAHASSEE			
The above named	I entity submits this statement for the purpose of changing its	reaistered office or reais	stered agent or both in the State of Florida
		egistered office of regis	serve agent, or boar, in the State of Fronda.
SIGNATURE	E: FELICIA NOWELS		04/04/2013
SIGNATURE			
SIGNATURE	E FELICIA NOWELS Electronic Signature of Registered Agent		04/04/2013
	E FELICIA NOWELS Electronic Signature of Registered Agent	Title	04/04/2013
Officer/Dire	E FELICIA NOWELS Electronic Signature of Registered Agent		04/04/2013 Date
Officer/Dire	E FELICIA NOWELS Electronic Signature of Registered Agent Ctor Detail : SEC	Title	P NOWLES, FELICIA 106 EAST COLLEGE AVENUE, SUITE
Officer/Dire Title Name	E FELICIA NOWELS Electronic Signature of Registered Agent Ctor Detail : SEC BESS, BRIAN	Title Name Address	P NOWLES, FELICIA
Officer/Dire Title Name Address	E FELICIA NOWELS Electronic Signature of Registered Agent Ctor Detail : SEC BESS, BRIAN 3760 HARSFIELD ROAD	Title Name Address	P NOWLES, FELICIA 106 EAST COLLEGE AVENUE, SUITE 1200
Officer/Dire Title Name Address City-State-Zip:	E FELICIA NOWELS Electronic Signature of Registered Agent Ctor Detail : SEC BESS, BRIAN 3760 HARSFIELD ROAD TALLAHASSEE FL 32301	Title Name Address	P NOWLES, FELICIA 106 EAST COLLEGE AVENUE, SUITE 1200
Officer/Dire Title Name Address City-State-Zip: Title	Electronic Signature of Registered Agent Electronic Signature of Registered Agent Ctor Detail : SEC BESS, BRIAN 3760 HARSFIELD ROAD TALLAHASSEE FL 32301 TRES	Title Name Address	P NOWLES, FELICIA 106 EAST COLLEGE AVENUE, SUITE 1200

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.

PRESIDENT

SIGNATURE: FELICIA NOWLES

Electronic Signature of Signing Officer/Director Detail

04/04/2013

Date

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37218

Entity Name: THE MARY BROGAN MUSEUM OF ART AND SCIENCE, INC.

Apr 04, 2013 Secretary of State CC8013985641

FILED