

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000005275

**Entity Name:** EARLY FLORIDA ARTS PRESERVATION FOUNDATION, INC.

**Current Principal Place of Business:**

301 N MAIN STREET  
HASTINGS, FL 32145

**Current Mailing Address:**

P.O. BOX 1011  
ST. AUGUSTINE, FL 32085

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MAGUIRE, CRAIG A  
1544 SAN RAFAEL WAY  
ST AUGUSTINE, FL 32080 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 D  
Name MAGUIRE, CRAIG  
Address PO BOX 1011  
City-State-Zip: ST. AUGUSTINE FL 32085

Title D  
Name MAGUIRE, JOAN  
Address 1544 SAN RAFAEL WAY  
City-State-Zip: ST AUGUSTINE FL 32080

Title D  
Name PELLICER, CHARLES E  
Address 2 8TH STREET  
City-State-Zip: ST AUGUSTINE FL 32080

*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:** CRAIG A. MAGUIRE

**DIRECTOR**

**04/20/2013**

Electronic Signature of Signing Officer/Director Detail

Date