#### 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. 03/22/2021

DIRECTOR

SIGNATURE: JUDY W SHERIDAN

# DOCUMENT# N20000012898

Entity Name: THE MICHAEL H. SHERIDAN AND JUDY W. SHERIDAN CENTER FOR THE ARTS FOUNDATION, INC.

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### **Current Principal Place of Business:**

535 WOODFERN COURT TALLAHASSEE, FL 32312

# **Current Mailing Address:**

535 WOODFERN COURT TALLAHASSEE, FL 32312 US

# FEI Number: 85-3902574

## Name and Address of Current Registered Agent:

FRANCE, BELINDA T ESQ. 2548 BLAIRSTONE PINES DR TALLAHASSEE, FL 32301 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

### **Officer/Director Detail :**

Title	D	Title	D
Name	SHERIDAN, MICHAEL H	Name	SHERIDAN, JUDY W
Address	535 WOODFERN COURT	Address	535 WOODFERN COURT
City-State-Zip:	TALLAHASSEE FL 32312	City-State-Zip:	TALLAHASSEE FL 32312

Electronic Signature of Signing Officer/Director Detail

# FILED Mar 22, 2021 Secretary of State 6429849523CC

Date

Certificate of Status Desired: Yes

Date