

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 91128 050 ****61.25

DOCUMENT # 701282

1. Entity Name

THE PENSACOLA HISTORIC PRESERVATION SOCIETY, INC

Principal Place of Business

4049 ALCONBURY CIRCLE
 P.O. BOX 12404
 PENSACOLA FL 32582

Mailing Address

4049 ALCONBURY CIRCLE
 P.O. BOX 12404
 PENSACOLA FL 32582



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-7236411

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEBOLT, JUDY
 4049 ALCONBURY CIRCLE
 PENSACOLA FL 32582

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ST Delete
 NAME: DEBOLT, JUDY
 STREET ADDRESS: 4049 ALCONBURY CIRCLE
 CITY-ST-ZIP: PENSACOLA FL 32514

TITLE: Change Addition
 NAME: DEBOLT, JUDITH A.
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: P Delete
 NAME: TURNER, HUGH
 STREET ADDRESS: 2009 UNIVERSITY STREET
 CITY-ST-ZIP: PENSACOLA FL

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: V Delete
 NAME: DEBOLT, W. DEAN
 STREET ADDRESS: 4049 ALCONBURY CIRCLE
 CITY-ST-ZIP: PENSACOLA FL 32514

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: D Delete
 NAME: HUTCHESON, JOHN JR.
 STREET ADDRESS: 10064 HUNTSMAN PATH
 CITY-ST-ZIP: PENSACOLA FL 32514-1689

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: D Delete
 NAME: FILLINGANE JEANETTE
 STREET ADDRESS: 6845 PINE FOREST RD.
 CITY-ST-ZIP: PENSACOLA FL 32526

TITLE: Change Addition
 NAME: DIRECTOR FRANK BIASCO
 STREET ADDRESS: 9759 PICKWOOD DRIVE
 CITY-ST-ZIP: PENSACOLA, FL 32514

TITLE: D Delete
 NAME: GRACE THOMPSON
 STREET ADDRESS: 704 BAYCLIFFS CIRCLE
 CITY-ST-ZIP: (my mistake - Wrong side - J. DeBolt)

TITLE: Change Addition
 NAME: GRACE THOMPSON
 STREET ADDRESS: 704 BAYCLIFFS CIRCLE
 CITY-ST-ZIP: GULF BREEZE, FL 32561

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Judith A. DeBolt*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-01 (850)474-3491
 Date Daytime Phone #

CR2E037 (10/00)