2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 07, 2008 8:00 am Secretary of State

1. Entity Nam	MENT #705631 OLA HISTORICAL SOCIET	Y, INC.		04	-07-2008 90046	020 ****61.2	25	
Principal Place 110 EAST CH PENSACOLA,	furch street	Mailing Address 110 EAST CHURCH STRE PENSACOLA, FL 32502				III BIBIN OLDIN BIBIN BIBIN	: 	
2. Principal Place of Business - No P.O. Box # 3. Ma		3. Mailing Address	Mailing Address					
Suite, Apt. #, etc. Si		Suite, Apt, #, etc.	Suite, Apt. #, etc.		hg-NP CR2	E037 (12/06)	* :	
City & State C		City & State	Dity & State		'9		olled For: Applicable	
Zip	Country	Zip	Country	5. Certificate of Si	atus Desired	\$8.75 Addit	tional ;	
	6. Name and Address of Current	Registered Agent		7. Name and Add	ress of New Register	red Agent		
	0, 1,4110 0,100,100,100		Name					
MAINOR, ROBYN A 110 EAST CHURCH STREET PENSACOLA, FL 32502			Street Address		(P.O. Box Number is Not Acceptable)			
	- 1	•	City		· · · · · · · · · · · · · · · · · · ·	⊏∎ Zip Code		
					-	TL.		
	named entity submits this statement for	or the purpose of changing its re	agistered office or	registered agent, or both, in	the State of Florida. I	am familiar with, a	and accept	
the obligat	ions of registered agent.	non	,					
	·92	1/////						
SIGNATURE .	Signature, typed or pyinted name of registered agent	and title if applicable. (NOTE: F	Regislered Agent signatu	are required when reinstating)	DA	ITE	- :	
	Signature, trood or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2008	and title if applicable. (NOTE: F 9. Election Camp Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees	Make ch	neck payable to		
	Filing Fee is \$61.25	9. Election Camp Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees	Make ch	neck payable to partment of Sta	ate	
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Camp Trust Fund Co	paign Financing ntribution.	\$5.00 May Be Added to Fees	Make ch Florida De	neck payable to partment of Sta	ate	
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DI D MOORE, PATRICK DR 9731 CREEK BRIDGE CIR	9. Election Camp Trust Fund Co	paign Financing ntribution. 11. TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees	Make ch Florida De	neck payable to partment of Sta	ate	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PILING Fee Is \$61.25 Due by May 1, 2008 OFFICERS AND DIE MOORE, PATRICK DR 9731 CREEK BRIDGE CIR PENSACOLA, FL 32514 P JOHNSON-JORDAN, SANDRA 428 WARWICK ST	9. Election Camp Trust Fund Co RECTORS	ntribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees	Make ch Florida De	neck payable to partment of Sta	10	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND DID MOORE, PATRICK DR 9731 CREEK BRIDGE CIR PENSACOLA, FL 32514 P JOHNSON-JORDAN, SANDRA 428 WARWICK ST GULF BREEZE, FL 32561 VP VICKERS, ELIZABETH 3720 MCCLELLAN RD	9. Election Camp Trust Fund Co RECTORS Delete	Daign Financing Intribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHANG S Edwards, David	Make ch Florida De ESTO OFFICERS AND	D DIRECTORS IN Change	10	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	FILING Fee Is \$61.25 Due by May 1, 2008 OFFICERS AND DIE MOORE, PATRICK DR 9731 CREEK BRIDGE CIR PENSACOLA, FL 32514 P JOHNSON-JORDAN, SANDRA 428 WARWICK ST GULF BREEZE, FL 32561 VP VICKERS, ELIZABETH 3720 MCCLELLAN RD PENSACOLA, FL 32503 T RANNEY, DAVID ONE ENERGY PLACE	9. Election Camp Trust Fund Co RECTORS Delete Delete	Daign Financing Intribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	\$5.00 May Be Added to Fees ADDITIONS/CHANG	Make ch Florida De ESTO OFFICERS AND d len Drive 32504	D DIRECTORS IN Change Change	10 Addition Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 appreciate with all other like empowered.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(850) 434 5455

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