

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741020

FILED
Feb 21, 2011
Secretary of State

Entity Name: PLANTATION HISTORICAL SOCIETY, INC.

Current Principal Place of Business:

511 NORTH FIG TREE LANE
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

511 NORTH FIG TREE LANE
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 59-1807194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHAFFER, ROSEMARY
511 NORTH FIG TREE LANE
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: TINGLE, PEGGY
Address: 511 NORTH FIG TREE LANE
City-St-Zip: PLANTATION, FL 33317

Title: 1V
Name: RICKE, ANTOINETTE
Address: 511 NORTH FIG TREE LANE
City-St-Zip: PLANTATION, FL 33317

Title: 2V
Name: CORBIN, SYDNEY
Address: 511 NORTH FIG TREE LANE
City-St-Zip: PLANTATION, FL 33317

Title: T
Name: SLIZA, MARY
Address: 511 NORTH FIG TREE LANE
City-St-Zip: PLANTATION, FL 33317

Title: CS
Name: FITZPATRICK, BETTY
Address: 511 NORTH FIG TREE LANE
City-St-Zip: PLANTATION, FL 33317

Title: RS
Name: FITZPATRICK, BETTY
Address: 511 NORTH FIG TREE LANE
City-St-Zip: PLANTATION, FL 33317

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: MARY SLIZA

TREA

02/21/2011

Electronic Signature of Signing Officer or Director

Date