741275

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

800431207008

CORPORATION NOT FOR PROFIT

Word Processing: January 4, 1978 By: pas

Updating: 1/19/78 By: DM.

A notification letter was mailed to: Brandt C. Downey, III, Esquire
Post Office Box 5047
Clearwater, Florida 33518 Addressed to: Mr. Downey

Corporation Name: SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC.

Filing Date: December 30, 1977

Charter Number: 741275

Money acknowledge on notification letter: $38.00

741275

FOX, GEORGE, LOEFFLER & DOWNEY, P. A.
ATTORNEYS AT LAW
2111 DREW STREET
P. O. BOX 5047
CLEARWATER, FLORIDA 33518

599412

741275

DECEMBER 14, 1977

DEC 19[illegible] 8 *2853 *****3.

DEC 19[illegible] 1 *2852 *****5.

DEC 19[illegible] *2851 *****30.

THE HONORABLE BRUCE A. SMATHERS
SECRETARY OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA 32304

AMC

FLORIDA DEPARTMENT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA
DEC 21 AM 10 1

RE: SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS

DEAR SIR:

ENCLOSED PLEASE FIND OUR CHECK IN THE AMOUNT OF $38.00 AND TWO COPIES OF THE ARTICLES OF INCORPORATION OF THE ABOVE NAMED CORPORATION.

THE CHECK COVERS THE FOLLOWING ITEMS:

FILING FEE - CERTIFICATE OF INCORPORATION	$30.00
REGISTERED AGENT CERTIFICATE	3.00
CERTIFIED COPY	5.00

WE REQUEST THAT YOU RETURN TO US THE CERTIFIED COPY OF THE CHARTER, TOGETHER WITH THE REGISTERED AGENT AND CORPORATE CERTIFICATES.

VERY TRULY YOURS,

Brandt C. Downey

BRANDT C. DOWNEY III,
ATTORNEY AT LAW

BCD/MLW
ENCLOSURES

PRIVILEGE TAX	
C. TAX	
FILING	30
C. COPY	5
R. A. FEE	3
P. COPY	
SEARCH	
TOTAL	38
BALANCE DUE	

CW

RECEIVED
DEC 19 8 57 AM 1977
FLORIDA DEPARTMENT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

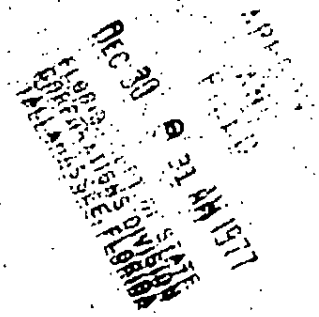
Fox, George, Loeffler & Downey, P.A.

ATTORNEYS AT LAW

ROLAND FOX
CHARLES D. GEORGE
DOUGLAS J. LOEFFLER
BRANDT C. DOWNEY III
ROBERT L. SHEAR

2111 DREW STREET
POST OFFICE BOX 5047
CLEARWATER, FLORIDA 33518
TELEPHONE (813) 443-0411

December 28, 1977



Jennette Zachero
Corporation Division
Secretary of State
Tallahassee, Florida 32304

Re: Safety Harbor Museum of History & Fine Arts, Inc.

Dear Ms. Zachero:

As per our telephone conversation of this date, I am herewith enclosing original and duplicate of Articles of Incorporation and Resident Agent Certificate for filing. It is my understanding that you have retained my check in the amount of $38.00 as filing fee, etc. in this matter. It would be sincerely appreciate if you would expedite the filing of this corporation and return of the Certified Copy to me.

Thank you for your cooperation in this matter.

Yours truly,

BRANDT C. DOWNEY III
Attorney at Law

BCD:mlw

Enclosure

Secretary of State

STATE OF FLORIDA
THE CAPITOL
TALLAHASSEE 32304

Bruce A. Smathers
SECRETARY OF STATE

December 27, 1977

Brandt C. Downey III, Esq.
P. O. Box 5047
Clearwater, Florida 33518

Division of Corporations
Charter Section
904/488-2675

APPROVED AND FILED
DEC 30 9 33 AM 1977
FLORIDA SECRETARY OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

SUBJECT: SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS - Articles of Inc.

Returned xx; Pending _____. Check acknowledged ~~$38.00~~

1. _____ NAME IS NOT AVAILABLE.
2. xx Name must include a corporate suffix, INC. or INCORPORATED.
3. _____ BALANCE DUE.
4. _____ The number of directors the corporation shall have (no less than three) must be shown with a statement designating the total number.
5. _____ The articles state that there will be _____ directors (initially) However, _____ are listed.
6. _____ The qualifications for membership must be shown in the articles of incorporation.
7. _____ The articles of incorporation must state who will manage the affairs of the corporation.
8. _____ Please list the officers and the office(s) held by each.
9. _____ A designation of registered office and registered agent at the same address must be contained within the articles of incorporation, and the registered agent must sign accepting that designation.
10. _____ All incorporators must sign and their signatures must be acknowledged.
11. _____ All incorporators signing must be listed in Article _____.
12. _____ Notary public's acknowledgement is incomplete.
13. _____ Incorporators cannot notarize their own signatures.
14. _____ The document(s) must be legible for microfilming.
15. _____ You must list at least three (3) directors and three (3) incorporators.
16. _____ The articles must state by whom the by-laws may be made, altered, or rescinded.
17. _____ The articles must state by whom and in what manner amendments to the articles of incorporation may be made.
18. _____

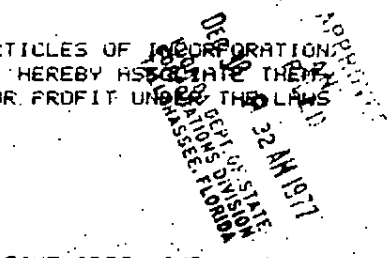
/mg

CHA. 112 (Corp. 4)
5/24/76

ARTICLES OF INCORPORATION

OF

SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC.



THE UNDERSIGNED SUBSCRIBERS TO THESE ARTICLES OF INCORPORATION, EACH A NATURAL PERSON COMPETENT TO CONTRACT, HEREBY ASSOCIATE THEMSELVES TOGETHER TO FORM A CORPORATION NOT FOR PROFIT UNDER THE LAWS OF THE STATE OF FLORIDA.

ARTICLE I - NAME

THE NAME OF THE CORPORATION IS:

SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC.

ARTICLE II - ADDRESS

THE INITIAL STREET ADDRESS OF THE PRINCIPAL OFFICE OF THIS CORPORATION IS TO BE AT 115 MAIN STREET, PINELLAS COUNTY, SAFETY HARBOR, FLORIDA 33572. THE OFFICERS MAY FROM TIME TO TIME DESIGNATE SUCH OTHER ADDRESS AND PLACE FOR THE PRINCIPAL OFFICE OF THIS CORPORATION AS THEY MAY SEE FIT.

ARTICLE III - PURPOSE

TO PROMOTE, ENCOURAGE, MAINTAIN AND OPERATE A HISTORICAL MUSEUM FOR THE PRESERVATION OF KNOWLEDGE AND APPRECIATION OF FLORIDA HISTORY BY ENCOURAGING THE CITIZENS TO ENGAGE IN THE PRESERVATION AND CARE OF ARTIFACTS, MUSEUM ITEMS, TREASURE TROVE AND OTHER HISTORICAL PROPERTIES, TO DISPLAY AND INTERPRET HISTORICAL MATERIALS; TO TEACH FLORIDA HISTORY OF THE AREA, TO CONDUCT AND PRESENT HISTORICAL CELEBRATIONS AND DRAMAS, TO PUBLICIZE THE AREAS HISTORY THROUGH MEDIA OF PUBLIC INFORMATION, AND OTHER ACTIVITIES OF HISTORICAL AND ALLIED FIELDS.

ARTICLE IV - MEMBERSHIP

ANY PERSON WHO IS INTERESTED IN THE DEVELOPMENT OF THIS PROGRAM SHALL BE QUALIFIED FOR MEMBERSHIP IN THIS CORPORATION. SUCH PERSON SHALL BE ADMITTED TO MEMBERSHIP UPON HIS OR HER APPLICATION THEREFOR AND APPROVAL THEREOF BY THE BOARD OF DIRECTORS OF THIS CORPORATION.

ARTICLE V - EXISTENCE

THIS CORPORATION SHALL HAVE PERPETUAL EXISTENCE, UNLESS TERMINATED BY LAW, DISSOLUTION OR UNFORESEEN CIRCUMSTANCES.

ARTICLE VI - INITIAL SUBSCRIBERS

THE NAMES AND RESIDENCES OF THE SUBSCRIBERS TO THESE ARTICLES ARE:

DANIEL F. WATSON SR
115 MAIN STREET
SAFETY HARBOR, FLORIDA 33572.

M. L. WATSON
115 MAIN STREET

SAFETY HARBOR, FLORIDA 33572

BRANDT C. DOWNEY III
2111 DREW STREET
CLEARWATER, FLORIDA 33518

ARTICLE VII - OFFICERS

THE BUSINESS AFFAIRS OF THIS CORPORATION SHALL BE MANAGED BY THE PRESIDENT, EXECUTIVE VICE-PRESIDENT, VICE-PRESIDENTS, CORRESPONDING SECRETARY AND TREASURER. THE POSITIONS OF SECRETARY AND TREASURER MAY BE HELD BY THE SAME PERSON.

ARTICLE VIII - INITIAL OFFICERS

THE NAMES OF THE OFFICERS WHO ARE TO SERVE AND MANAGE ALL OF THE AFFAIRS OF THE CORPORATION UNTIL THE FIRST ELECTION OR APPOINTMENT UNDER THESE ARTICLES OF INCORPORATION ARE.

DANIEL F. WATSON SR - PRESIDENT/TREASURER
BRANDT C. DOWNEY III - EXECUTIVE VICE-PRESIDENT
M. L. WATSON - VICE-PRESIDENT/SECRETARY

THERE SHALL BE THREE (3) DIRECTORS INITIALLY. THE NUMBER OF DIRECTORS MAY BE INCREASED OR DECREASED FROM TIME TO TIME BY THE BY-LAWS, BUT SHALL NEVER BE LESS THAN THREE (3).

ARTICLE IX - INITIAL DIRECTORS

THE NAMES AND RESIDENCES OF THE FIRST BOARD OF DIRECTORS WHO SHALL HOLD OFFICE UNTIL THEIR SUCCESSORS ARE ELECTED AND QUALIFIED ARE AS FOLLOWS:

DANIEL F. WATSON SR
115 MAIN STREET
SAFETY HARBOR, FLORIDA 33572

M. L. WATSON
115 MAIN STREET
SAFETY HARBOR, FLORIDA 33572

BRANDT C. DOWNEY III
2111 DREW STREET
CLEARWATER, FLORIDA 33518

ARTICLE X - EFFECTIVE DATE

THESE ARTICLES OF INCORPORATION SHALL BE EFFECTIVE UPON RECEIPT BY THE SECRETARY OF STATE'S OFFICE.

ARTICLE XI - AMENDMENTS

THE ARTICLES OF INCORPORTION AND THE BY-LAWS OF THIS CORPORATION MAY BE MADE, ALTERED OR RESCINDED UPON A TWO-THIRDS VOTE OF THE ACTIVE MEMBERS PRESENT AT ANY REGULAR MEETING OR SPECIAL MEETING OF THE MEMBERSHIP DULY CALLED FOR THAT PURPOSE.

ARTICLE XII - DISSOLUTION

IN THE EVENT OF DISSOLUTION THE RESIDUAL ASSETS OF THE ORGANIZATION SHALL BE TURNED OVER TO ONE OR MORE ORGANIZATIONS WHICH THEMSELVES ARE EXEMPT AS ORGANIZATIONS DESCRIBED IN SECTIONS 501(C)(3)N.170(C)(2) OF THE INTERNAL REVENUE CODE OF 1954 OR CORRES-

FONDING SECTION OF ANY PRIOR OR FUTURE INTERNAL REVENUE CODES OR TO THE FEDERAL, STATE OR LOCAL GOVERNMENT FOR EXCLUSIVE PUBLIC PURPOSE.

IN WITNESS WHEREOF, WE HAVE SET OUR HANDS AND SEALS AND ACKNOWLEDGED THAT THE FOREGOING ARTICLES OF INCORPORATION UNDER THE LAWS OF THE STATE OF FLORIDA, THIS 28th DAY OF December 1977.

DANIEL F. WATSON SR

M. L. WATSON

BRANDT C. DOWNEY III.

STATE OF FLORIDA
COUNTY OF PINELLAS

BEFORE ME, THE UNDERSIGNED, PERSONALLY APPEARED DANIEL F. WATSON, M. L. WATSON AND BRANDT C. DOWNEY III, TO ME WELL KNOWN TO BE THE INDIVIDUALS DESCRIBED IN AND WHO ACKNOWLEDGE THE FOREGOING ARTICLES OF INCORPORATION AND THAT THEY EXECUTED IT FOR THE USES AND PURPOSES THEREIN EXPRESSED.

WITNESS MY HAND AND OFFICIAL SEAL IN THE COUNTY AND STATE NAMED ABOVE THIS 28th DAY OF December, 1977.

MY COMMISSION EXPIRES.

Notary Public, State of Florida at Large
My Commission Expires Oct. 4, 1980
Bonded By American Fire & Casualty Company

NOTARY PUBLIC

REGISTERED AND RESIDENT AGENT CERTIFICATE OF SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC.

IN PURSUANCE OF CHAPTER 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED, IN COMPLIANCE WITH SAID ACT.

THAT THE ABOVE-NAMED CORPORATION DESIRING TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA WITH ITS PRINCIPAL OFFICE AS INDICATED IN THE ARTICLES OF INCORPORATION AND SHOWN BELOW HAS NAMED THE UNDERSIGNED AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN THIS STATE AT THE ADDRESS SET FORTH BELOW.

ACKNOWLEDGMENT.

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT TO ACT IN THIS CAPACITY, AND AGREE TO COMPLY WITH THE PROVISION OF SAID ACT RELATIVE TO KEEPING OPEN SAID OFFICE.

BY: _____
BRANDT C. DOWNEY, III,
REGISTERED AND RESIDENT AGENT

REGISTERED AND RESIDENT AGENT'S INFORMATION:

2111 DREW STREET
PINELLAS COUNTY
CLEARWATER, FLORIDA 33518

PRINCIPAL OFFICE INFORMATION.

115 MAIN STREET.
PINELLAS COUNTY
SAFETY HARBOR, FLORIDA 33572

THE FILING FEE FOR THE 1978 ANNUAL REPORT IS $10.

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Jesse J. McCrary, Jr.
Secretary of State

CORPORATION ANNUAL REPORT
1978

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE.

Form COR 620

DO NOT WRITE IN THIS AREA

FILED

Oct 11 12 00 AM 1978

FLORIDA DEPARTMENT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

1. Name and Address of Corporation Principal Office:

741275
SAFETY HARBOR MUSEUM OF HISTORY &
APTS. INC.
115 MAIN STREET
SAFETY HARBOR, FLORIDA 33572

IF YOU HAVE ALREADY SENT YOUR 1978 REPORT, DISREGARD THIS NOTICE
If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business In Florida: 12/30/1977

4. Federal Employer Identification Number (FEIN): 59-1782315

5. Date of Last Report: Incorporated 12/30/77

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
DANIEL F. WATSON SR	Pres, Treas	X	115 Main Street	Safety Harbor Florida 33572
M. L. WATSON	Secty V-P	X	115 Main Street	Safety Harbor Florida 33572
BRANDT C. DOWNEY III	Exec. V-P	X	2111 Drew Street	Clearwater Florida 33518

7. Registered Agent Information

Name: BRANDT C. DOWNEY III
Street Address (Do NOT Use P.O. Box Number): 2111 Drew Street
City, State and Zip Code: Clearwater, Florida 33518

If you wish to change Registered Agent on this form, enter all new information here

Name
Street Address (Do NOT Use P.O. Box Number)
City, State and Zip Code

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted, Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

DO NOT WRITE IN THIS AREA 10/11/78

Typed Name of Signing Officer: DANIEL F. WATSON SR
Title: President
Telephone Number: 726-0222
Signature: [signature]
Date: 10/6/78

THIS REPORT MUST BE ACCOMPANIED BY THE $10 FEE

THE FILING FEE FOR THE **1979** ANNUAL REPORT IS **$10.**

CORPORATION ANNUAL REPORT

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

1979

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

FILED

MAY 17 | 12 AM 979

FLORIDA DEPARTMENT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

◄ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ►

1. Name and Address of Corporation Principal Office:

741275
SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC.
115 MAIN STREET
SAFETY HARBOR, FLORIDA 33572

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 12/30/1977

4. Federal Employer Identification Number (FEIN): 59-1782315

5. Date of Last Report: 1978

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
WATSON,SR., DANIEL F.	D/P/T	0115 MAIN STREET	SAFETY HARBOR, FL
DOWNEY,III, BRANDT C.,	V/D	2111 DREW STREET	CLEARWATER, FL
WATSON, M. L.	V/S	0115 MAIN STREET	SAFETY HARBOR, FL

7. Registered Agent Information

Name: DOWNEY,III, BRANDT C.

Street Address (Do NOT Use P.O. Box Number): 2111 DREW STREET

City, State and Zip Code: CLEARWATER, FLORIDA 33516

If you wish to change Registered Agent on this form, enter all new information below.

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

DO NOT WRITE IN THIS SPACE

8. **See signature restrictions under instructions on reverse side of this form.**

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

5/17 79

Typed Name of Signing Officer

Title: Director Pres.

Telephone Number: 1-813-726-0232

Signature

Date

(Form CDR 520 Rev. 10-75)78

NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

03-31-79 2 6 554 10.0

Safety Harbor Museum of History & Fine Arts

329 S. Bayshore Blvd.
Safety Harbor, Fla. 33572
Phone ~~736-0233~~ 937-3901

1412 6th Avenue, Holiday, Florida 33590

November 10, 1979

Annual Reports
Division of Corporations
The Capitol
Tallahassee, Florida 32304

Sirs: Re: Change of mailing address

This is to advise you that the address of the Safety Harbor Museum of History and Fine Arts has been changed from: 115 Main Street, Safety Harbor, Florida to: 1412 6th Avenue, Holiday, Florida, 33590. Future communications should be sent to this address. Thank you. At elections in October 1979 a change or officers and directors took place.

Sincerely,

Thelma H. Bull

Thelma H. Bull
Executive Secretary

741275

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

1980

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

FILED

APR-14 1 16 PM '80

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office:

741275
SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC.
1412 6TH AVENUE
HOLIDAY, FL 33590

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone Is NOT Sufficient.

Street Address

P.O. Box No.

City 7161 3/25/80 741275
006 2 10.00 DS

State Zip Code

3. Date Incorporated or Qualified To Do Business In Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
12/30/1977	59-1782315	1979

6. Names and Street Addresses of Each Officer and Director

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Officers & Directors	City & State
Pilcher, H. G.	P	1307 W. Olive St	Lakeland, Fl
McCain, James H.	V	1015 Greenbriar Dr	Brandon, Fl
Lube, Neal W.	V	10330 66th St, North	Pinellas Park, Fl
Bull, Thelma H.	S/T	1412 6th Avenue	Holiday, Fl
Styron, Charles G.	D	110 Avon Drive	Safety Harbor, Fl
Braddy, Wm. A.	D	732 Crevasse Street	Lakeland, Fl
Wells, Frances M.	D	6700 102nd Ave, No	Pinellas Park, Fl
Lee, Robert E.	D	Cor. Weinberg & Detour Rd	Dundee, Fl
Pleso, Maxine	D	345 8th Avenue, No	Safety Harbor, Fl
Bierman, Sissie	D	205 Philippe Parkway	Safety Harbor, Fl
Vance, Margone	D	400 9th Avenue, So	Safety Harbor, Fl

7. Registered Agent Information

Name: Thelma H. Bull

Street Address (Do NOT Use P.O. Box Number): 1412 6th Avenue

City, State and Zip Code: Holiday, Fla 33590

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of $3.

8. **See signature restrictions under instructions on reverse side of this form.**

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer	Title	Telephone Number
H. G. Pilcher	President	813 682 4769

Signature H. G. Pilcher Date 3-8-80

DO NOT WRITE IN THIS SPACE

Form COR 520 Rev. 11/16/79

Safety Harbor Museum of History & Fine Arts

329 S. Bayshore Blvd.
Safety Harbor, Fla. 33572
~~Phone 726-0222~~

1412 6th Avenue, Holiday, Fl 33590

March 3rd, 1980

Florida Department of State
Division of Corporations
1980 Annual Reports
P. O. Box 6327
Tallahassee, Florida 32301

Sirs:

At the general membership meeting and election officer of the Safety Harbor Museum of History and Fine Arts on October 20, 1979, Thelma H. Bull was appointed Executive Secretary of the Museum and designated as Registered Agent.

This is to advise that Mr. Brandt C. Downey III, 2111 Drew Street, Clearwater, Florida is no longer connected with the Museum in any manner.

H. G. Pilcher
H. G. Pilcher
President

Thelma H. Bull
Thelma H. Bull
Registered Agent

7100 3/26/80 7018??
006 27 3.0

Safety Harbor Museum of History & Fine Arts

329 S. Bayshore Blvd.
Safety Harbor, Fla. 33572
~~Phone 726-9333~~

1412 6th Avenue, Holiday, Florida
March 10, 1980

Secretary of State
1980 Annual Reports
P. O. Box 6327
Tallahassee, Florida 32301

Dear Sir:

There is enclosed the duly executed report of the Safety Harbor Museum of History and Fine Arts for the year 1980 and check for $10.00 covering fee due. There is also enclosed check for $3.00 covering fee due for change of Registered Agent and/or Registered Office together with separate statement signed by the President and new Registered Agent.

Sincerely,

Thelma H. Bull

Thelma H. Bull
Executive Secretary

encls: 2 checks
1980 Annual Report
Statement

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

1981

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

FILED

MAY 20 PM 55 '81

DEPARTMENT OF STATE

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office:

741275
SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC.
1912 6TH AVENUE
HOLIDAY, FL 33590

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business In Florida: 12/30/1977

4. Federal Employer Identification Number (FEIN): 59-1782315

5. Date of Last Report: 1980

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
PILCHER, H. G.	P	1307 W. OLIVE ST.	LAKELAND, FL
MICHAELS, JOHN	V	1609 Palmetto St	Clearwater, Fl
LUBE, NEAL W.	V	10330 66TH ST. N.	PINELLAS PARK, FL
BULL, THELMA H.	S/T	1412 6TH AVE.	HOLIDAY, FL
PLESO, MICKEY	D	345 8th Avenue	Safety Harbor, Fl
ROSE, ERICA	D	3236 San Bernandino	Clearwater, Fl
RUSSELL, BARRY E.	V	3260 Sandpiper Lane	Mulberry, Fl
LEE, ROBERT E.	D	Box A-1, Detour Road	Dundee, Fl

7. Registered Agent Information

Name: BULL, THELMA H.

Street Address (Do NOT Use P.O. Box Number): 1412 6TH AVENUE

City, State and Zip Code: HOLIDAY, FLORIDA 33590

To change the Registered Agent and/or Registered Office, a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of $3.

8. *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer	Title	Telephone Number
Thelma H. Bull	Executive Secretary-Treas	813-937-3901

Signature: Thelma H. Bull

Date: May 5th, 1981

DO NOT WRITE IN THIS SPACE

741275 05-12-81 2 3 65 10.00

Form CCR 620 (Rev. 10-78)

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT **1982**

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

ACCEPTED
AND
FILED

MAY 28 12 49 PM 1982

FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $10 Required —Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office:

741275
SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC.
1412 6TH AVENUE
HOLIDAY, FL 33590

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 12/30/1977

4. Federal Employer Identification Number (FEIN): 59-1782315

5. Date of Last Report: 05/20/1981

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
PILCHER, H. G.	P	1307 W. OLIVE ST.	LAKELAND, FL
MICHAEL, JOHN	V	1609 PALMETTO ST.	CLEARWATER, FL.
LUBE, NEAL W.	V	10330 66TH ST. N.	PINELLAS PARK, FL
BULL, THELMA H.	S/T	1412 6TH AVE.	HOLIDAY, FL
~~RUSSO, MICKEY~~	~~D~~	~~345 8TH AVENUE~~	~~SAFETY HARBOR, FL~~
~~ROSE, ERICA~~	~~D~~	~~3336 SAN BERNANDINO~~	~~CLEARWATER, FL~~
REYNOLDS, DOROTHY	D	620 Bayway Blvd	Clearwater Beach, Fl
WELLS, FRANCES M.	C	6700-102nd Ave, No	Pinellas Park, Fl
FARRINGTON, MITZI	C	2467 Finlandi Lane	Clearwater, Fl

Registered Agent Information

7. Name and Address of Current Registered Agent:

BULL, THELMA H.
1412 6TH AVENUE
HOLIDAY, FLORIDA 33590

8. Name and Address of New Registered Agent:

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.036 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on _____

SIGNATURE _____ DATE _____

Registered Agent Accepting Appointment

$3.00 additional fee required for Registered Agent changes.

See signature restrictions under instructions on reverse side of this form.

Certify That I Am An Officer of the Corporation, or a Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Signature: H. G. Pilcher

Date: May 17th, 1982

Type or Print Name & Signing Officer: H. G. Pilcher

Title: President

Telephone Number: 813 682 4769

(CR2E011 (1-81))

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT 1983

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

APPROVED AND FILED
MAY 16 11 55 AM 1983
FLORIDA DEPT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

► **Read Notice and Instructions on Other Side Before Making Entries**

Filing Fee of $10 Required — Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office

741275
SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC.
1412 6TH AVENUE
HOLIDAY, FL 33590

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address: 329 South Bayshore Blvd
P.O. Box No.:
City: Safety Harbor
State: Florida
Zip Code: 33572

3. Date Incorporated or Qualified to Do Business in Florida: 12/30/1977

4. Federal Employer Identification Number (FEI No.): 59-1782315

5. Date of Last Report: 05/28/1982

6. Name and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use P.O. Box Numbers)	City and State	
~~MICHAEL, JOHN~~	~~V~~	~~1689 PALMETTO ST~~	~~CLEARWATER, FL~~	0000
BULL, THELMA H	S/T	1412 6TH AVE	HOLIDAY, FL	0000
LUBE, NEAL W	V	10330 66TH ST N	PINELLAS PARK, FL	0000
REYNOLDS, DOROTHY	D	620 BAYWAY BLVD	CLEARWATER BCH, FL	0000
~~PILCHER, H G~~	~~P~~	~~1307 W OLIVE ST~~	~~LAKELAND, FL~~	0089
WELLS, FRANCES M	C	6700-102ND AVE NO	PINELLAS PARK, FL	0000
MICHAEL, JOHN R.	P	1609 Palmetto Street	Clearwater, Fl	33515
FARRINGTON, MITZI	C	2467 Finlandi Lane	Clearwater, Fl	33515
WETHERILL, Paul C.	V	170 Suncrest Drive	Safety Harbor, Fl	33572

Registered Agent Information

7. Name and Address of Current Registered Agent

BULL, THELMA H.
1412 6TH AVENUE
HOLIDAY, FLORIDA 33590

8. Name and Address of New Registered Agent

Name:
Street Address (Do NOT Use P.O. Box Number):
City, State and Zip Code:

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation organized under the laws of the State of [illegible] submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Such change was authorized by resolution duly adopted by its board of directors on ______

SIGNATURE ______ DATE ______
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

See Signature Restrictions in the Instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Signature: *John R. Michael*

Date: *April 2, 1983*

Typed or Printed Name of Signing Officer: John R. Michael
Title: President
813-443-1258

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 ON EACH YEAR

CORPORATION ANNUAL REPORT

1984

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

Jan 13 11 20 AM 1984

FILED
SECRETARY OF STATE
CORPORATION DIVISION
TALLAHASSEE, FLORIDA

◄ **Read Notice and Instructions on Other Side Before Making Entries**

Filing Fee of $10 Required — Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office.

741275
SAFETY HARBOR MUSEUM OF HISTORY & FINE ART
329 S. BAYSHORE BLVD
SAFETY HARBOR, FL 33572

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address:

P.O. Box No.:

City:

State: Zip Code:

3. Date Incorporated or Qualified To Do Business in Florida: 12/30/1977

4. Federal Employer Identification Number (FEIN): 59-1782319

5. Date of Last Report: 05/16/1983

6. Names and Street Addresses of Each Officer and Director, as of December 31 1983

Names of Officers	Title	Street Address of Each Officer and Director	
1 MICHAEL, John R.	P	1609 Palmetto ST.	Clearwater, FL
2 LUBE, Neal W.	V	10330 66th ST. N.	Pinellas Park, FL
3. LEARN, Richard L.	V	154 Kendale Dr.	Safety Harbor, FL
4 FARRINGTON, Mitzi	T	2467 Finlandi Lane	Clearwater, FL
5 LEARN, Noreen R.	S	154 Kendale Dr.	Safety Harbor, FL
6 REYNOLDS, Dorothy	D	1960 McKinley ST.	Clearwater, FL
7 ROWE, John	Supt	165 Suncrest Dr.	Safety Harbor, FL

33590 Clearwater, FL 33575

8. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on: _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. *See signature restrictions under instructions on reverse side of this form*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath

Signature	Date
Noreen R Learn	6/28/84
Typed Name of Signing Officer: Noreen R Learn	Title: Secretary
	Telephone Number: 813-726-1810

11. *Should you desire a certificate of status check the box below and include an additional $5.00 with your payment.*

CERTIFICATE OF STATUS DESIRED
(Additional fee required for certificate)

COR 626 (1-84)

SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC.

ARTICLE VIII - OFFICERS

Section 2. ELECTION, APPOINTMENT AND TERM OF OFFICE.

B. All positions of office shall be subject to election and term of office by the Museum membership at the annual meeting. Said positions shall be elected on a staggered basis so that the entire Board would not be replaced with new officers at one time for continued smooth operation of the purposes and goals of the Museum. Officers can succeed themselves.

ARTICLE IX - DUTIES

Section 1. Museum Director

A. This elected office, shall be an administrative position, for the term of two years. Shall make ad hoc decisions when necessary.

Section 2. Museum Curator

A. This elected officer shall plan, execute and maintain the programs, proposals and objectives of the Museum in coordination with the Museum Director and/or Board of Directors for the growth, well-being and security of the Museum, for the term of two years.

Section 3. Museum Art Director

A. This elected officer shall plan, execute and maintain the programs, proposals and objectives of the Museum in coordination with the Museum Director and /or Board of Directors for the growth, well-being and security of the Museum Fine Arts, for the term of two years.

Section 7. Recording Secretary

A. This elected officer shall keep the Minutes of the meetings of the Board of Directors and the members of the Museum in the appropriate books of the Museum for the term of two years.

Section 8. Corresponding Secretary

A. This elected office shall assist the Recording Secretary in all phases of Museum business for the term of two years. All future references to Executive Secretary shall be amended to read Recording Secretary and all references to Secretary shall be amended to read Corresponding Secretary.

ARTICLE XIV MEETINGS OF MEMBERS

Section 1. Annual Meeting The annual meeting of the members of the Museum, so as to conform with the Museum activities, shall be in October of each year. The express purposes of said meeting shall be the election of officers and Board of Directors for the following year as required by the By-laws, receiving reports of officers and committees and for any other business required. At least (14) days written notice of the annual meeting shall be mailed to each member of the Museum at their place of business or residence.

ARTICLE XVI FINANCES

Section 2. Funds All funds received by the Museum shall be credited to the Museum and placed in an approved depository. All checks drawn by the Museum shall be signed according to account set forth in Article IX, Section 9.D. (Page 11) of these By-laws. Checks shall be issued for all bills owed by the Museum. The accounts of the Museum shall be audited each year as of June 30th by the Auditing Committee and the signed certificate of said Auditing Committee shall appear on the copy of the audit report to be sent to the Museum. A copy of the proposed fund-raising budget and actual Museum operating budget for the following year shall be submitted to the membership on or before September (regular meeting before Annual Meeting) of each year.

Approved: Dana Hay Reynolds
Director

1985

◀ Read Notice and Instructions on Other Side Before Making Entries ▶

Filing Fee of $20 Required — Make Checks Payable To: Secretary of State

743275 2
SAFETY HARBOR MUSEUM OF HISTORY & FINE ART
327 S DAYSHORE BLVD
SAFETY HARBOR, FL 33572

12/30/1977 | 59-1782215 | 07/13/1984

Names of Officers and Directors	Title	Street Address of Each Officer and Director (DO NOT Use a P.O. Box Number)	City, State and Zip Code
1 MICHAEL, JOHN	P	1609 PALMETTO ST	CLEARWATER, FL 0000
2 LUBE, NEAL W	V	10330 66TH ST N.	PINELLAS, FL 0000
3 LEARN, RICHARD L.	V	154 KENDALE DR	SAFTY HARBOR, FL 0000
ROWE, SHIRLEY ~~4 FARMINGTON, MICH~~	T	165 Suncrest Dr. ~~2467 FINLAND LN~~	SAFTY HARBOR FL. ~~CLEARWATER, FL~~ 0000
5 LEARN, NOREEN	S	154 KENDALE ST	SAFTY HARBOR, FL 0000
6 REYNOLDS, DOROTHY	D	1960 MCKINLEY ST	CLEARWATER, FL 0000

Registered Agent Information

Name and Address of Current Registered Agent

~~BULL, THELMA H.~~
~~1456 6TH AVENUE~~
~~HOLIDAY, FLORIDA 33590~~

Name and Address of New Registered Agent

Name: DOROTHY REYNOLDS
Street Address (DO NOT Use P.O. Box Number): 1960 MCKINLEY ST
City, State and Zip Code: CLEARWATER FL 33575

Dorothy Reynolds 2-16-85
(Registered Agent Affecting Any Changes)

$3.00 additional fee required for Registered Agent changes.

Dorothy Reynolds 2-16-85

DOROTHY REYNOLDS DIRECTOR 813-461-6977

X

$5 additional fee required for a Certificate of Status

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION

ANNUAL REPORT

1986

George Firestone
Secretary of State
DIVISION OF CORPORATIONS

◄ Read Notice and Instructions on Other Side Before Making Entries ►

Filing Fee of $20 Required – Make Checks Payable To: Secretary of State

741275 2
SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC
329 S BAYSHORE BLVD
SAFETY HARBOR, FL 33572

If above address is incorrect in any way, enter the correct address ... Zip Code

Street Address 21
P.O. Box No 22
City and State 23
Zip Code 24

Date Qualified in Florida: 12/30/1977 | 4 Federal Employer Identification Number (FEIN): 59-1782315 | 5 Date of Last Report: 03/05/1985

Names and Addresses of Each Officer and Director as of December 31, 1985

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
MICHAEL, JOHN	P	1609 PALMETTO ST	CLEARWATER, FL 00000
LUBE, NEAL W	V	10330 66TH ST N	PINLLAS, FL 00000
LEARN, RICHARD L	V	154 KENDALE DR	SAFTY HARBOR, FL 00000
ROWE, SHIRLEY	T	165 SUNCREST DR.	SAFETY HARBOR, FL
LEARN, NOREEN	S/T	154 KENDALE ST	SAFETY HARBOR, FL
REYNOLDS, DOROTHY	D	1960 MCKINLEY ST	CLEARWATER, FL 00000

REGISTERED AGENT INFORMATION

Name and Address of Current Registered Agent:
REYNOLDS, DOROTHY
1960 MCKINLEY ST.
CLEARWATER, FL 33575

Name and Address of New Registered Agent:
Michael, John
1609 Palmetto St.
City and State: Clearwater FL. Zip Code: 33515

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, submits ... for the purpose of changing its registered office or registered agent, or both, in the state of Florida ... was authorized by resolution duly adopted by its board of directors ...

I accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

John Robert Michael DATE 6/28/90
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

See signature restrictions under instructions on reverse side of this form

I ... That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. ... Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath ... must be listed in Block 6

Date

$ Additional Fee required for a ...

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION

ANNUAL REPORT
1987

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $25 Required – Make Checks Payable To: Secretary of State

1 Name and Address of Corporation's Principal Office

[redacted]75
SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC
329 S BAYS[redacted] BLVD
SAFETY HA[redacted], FL 33572

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2 Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3 Date Incorporated or Qualified to Do Business in Florida	4 Federal Employer Identification Number (FEIN)	5 Date of Last Report
12/30/1977	59-1782315	07/11/1986

Names and Street Addresses of Each Officer and Director, as of December 31, 1986

Names of Officers and Directors	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4	5
[redacted]MICHAEL, JOH[redacted]	P	1609 PALMETTO ST	CLEARWATER, FL	00000
[redacted]LEE, NEAL W	V	10330 [redacted] ST N	P[redacted]LLAS, FL	00000
LEHRN, RICHARD L	V	[redacted]54 [redacted]ENDALE D[redacted]	SAFETY HARBOR, FL.	
LEAR[redacted], NOREEN	S/T	15[redacted] [redacted]LE ST	SAFETY[redacted]R, FL	
[redacted], John	board member	10878 - 100th Ave. North	Seminole, FL.	

REGISTERED AGENT INFORMATION

Name and Address of Current Registered Agent

[redacted]MICHAEL, JOHN
1609 PALMETTO STREET
CLEARWATER, FL 33515

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL.

Zip Code 85

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office, or registered agent, or both, in the State of Florida.

The change was authorized by resolution duly adopted by its board of directors on: _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE John R Michael DATE 3/29/87
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

See signature restrictions under instructions on reverse side of this form.

Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath. Officer signing must be listed in Block 8).

Signature John R Michael Date 3/29/87

Name of Signing Officer: John Michael | Title: President | Telephone Number: 813/443-1258

CERTIFICATE OF STATUS DESIRED ☒ **$5 Additional Fee required for a Certificate of Status**

CR2E034 (1/86)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1988

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

741275

SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC
329 S BAYSHORE BLVD
SAFETY HARBOR, FL 33572

If above address is incorrect in any way, enter the correct address.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 12/30/1977

4. Federal Employer Identification Number (FEIN): 59-1782315

5. Date of Last Report: 06/29/1987

6. Names and Street Addresses of Each Officer and Director as of December 31, 1987

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
VALERIE C. WHITFORD	D	413 S. BASSHORE DR.	SAFETY HARBOR, FL.
BETTY KIMMEL	P/D	411 S. BAYSHORE DR.	" " "
KEN MONROE	VP	HUNTINGTON TRAILS	" "
BARTZ, MARILYN	SEC/TRE/D	HUNTINGTON TRAILS	" " "

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

JOHN MICHAEL
1509 PALMETTO ST.
CLEARWATER, FL. 34715

8. Name and Address of New Registered Agent

Name 81: VALERIE C. WHITFORD

Street Address 1 (Do NOT Use P.O. Box Number) 82: 413 S. BAYSHORE DR.

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: SAFETY HARBOR, FL. FL

Zip Code 85: 34695

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

Signature: Valerie C. Whitford Director (Registered Agent Accepting Appointment) DATE 6/17/88

Corporation qualified and transacted business in Florida

See signature restrictions under instructions on reverse side of this form.

I certify that I am An Officer or Director of this Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I certify That I Understand My Signature On This Report Is to Have the Same Legal Effect As if Made Under Oath. Director signing must be listed in Block 6.

Signature

Date 6/15

VALERIE C. WHITFORD DIRECTOR

Telephone number 725-2011

$5 Additional Fee Required for a

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT

1989

FLORIDA DEPARTMENT OF STATE
JIM SMITH
SECRETARY OF STATE
DIVISION OF CORPORATIONS

APPROVED AND FILED

1989 JUN 14 AM 9 57

FLORIDA DEPARTMENT OF STATE
CORPORATE RECORDS BUREAU
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side (Before Making Entries)

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

ZIP + 4

741275 2
SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC
329 S BAYSHORE BLVD
SAFETY HARBOR, FL ~~33572~~ 34695

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. State Incorporated or Qualified To Do Business in Florida: 12/30/1977

4. Federal Employer Identification Number (FEIN): 59-1782315

5. Date of Last Report: 08/11/1988

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1988

Title 2	Names of Officers and Directors	Street Address of Each Officer and Director 3 (Do NOT Use Post Office Box Numbers)	City and State 4
D	WHITFORD, VALERIE C.	413 S. BAYSHORE DRIVE	SAFETY HARBOR, FL.
P/D	KIMMEL, BETTY	411 S. BAYSHORE DRIVE	SAFETY HARBOR, FL.
V/P	~~[illegible]~~ PEDIGO, BOB ~~MORROW, KEN~~	1120 VIRGINIA AVE ~~HUNTINGTON TRAILS~~	PALM HARBOR, FL ~~SAFETY HARBOR, FL.~~
S/~~T~~D	BARTZ, MARILYN	1609 HAMPTON LANE ~~HUNTINGTON TRAILS~~	SAFETY HARBOR, FL.
T/D	PRUSS, MARY	123 HARBOR Wds. CIRCLE	SAFETY HARBOR, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

WHITFORD, VALERIE C.
413 S. BAYSHORE DRIVE
SAFETY HARBOR, FL. 34695

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: FL

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on _____

Having accepted the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE: Valerie Whitford DATE _____
(Registered Agent Accepting Appointment)

If a foreign corporation, state first transaction of business in Florida: _____

See signature restrictions under instructions on reverse side of this form.

Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath. Officer or Director Signing must be Noted in Block 6.)

Signature: Valerie Whitford Date: 5/22/89

Type or Print Name of Signing Officer or Director: DIRECTOR – VALERIE WHITFORD Title

Telephone Number: 823 726-1665

CERTIFICATE OF STATUS DESIRED

$5 Additional Fee required for a

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

APPROVED

P90028009

CORPORATION

ANNUAL REPORT

1990

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORRECTIONS

DO NOT WRITE IN THIS SPACE

FILED

1990 MAY 15 PM 1:41

FLORIDA DEPARTMENT OF STATE
CORPORATE ANNUAL REPORTS
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

741275 2

ZIP + 4 PRESORT
SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC
329 S BAYSHORE BLVD
SAFETY HARBOR, FL 34695-4053

If above address is incorrect in any way enter the correct address in item 2 include Zip Code

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified to Do Business in Florida: 12/30/1977

4. FEI Number: 59-1782315

FEI Number Applied For
FEI Number Not Applicable

5. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

1	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
D	WHITFORD, VALERIE C.	413 S. BAYSHORE DRIVE	SAFETY HARBOR, FL.
P/D	~~KIMMEL, BETTY~~ HORNE, LARRY	~~411 S. BAYSHORE DRIVE~~ 546 FIFTH ST. S	SAFETY HARBOR, FL.
V/P	~~PEDIGO, BOB~~ HOLLIHAN, DEAN	~~1120 VIRGINIA AVE~~ 2725 PARK DRIVE	PALM HARBOR, FL CLEARWATER, FL
S/D	~~BARTZ, MARILYN~~ MONROE, SALLY	~~1609 HAMPTON LANE~~ 1611 HAMPTON LANE	SAFETY HARBOR, FL.
T/D	PRUSS, MARY	123 HARBOR WDS CIRCLE	SAFETY HARBOR, FL

REGISTERED AGENT INFORMATION

Name and Address of Current Registered Agent

WHITFORD, VALERIE C.
413 S. BAYSHORE DRIVE
SAFETY HARBOR, FL. 34695

6. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: FL.

Zip Code 85

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

The street address of its registered office and the name of its registered agent are hereby authorized to be changed.

The above-named corporation authorizes the execution of this statement by its president duly attested by its secretary.

The above-named corporation hereby authorizes the execution of this statement by its president duly attested by its board of directors on: _____

I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

I hereby certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; I further certify that I am an officer or director of this corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, F.S.

SIGNATURE Mary Pruss DATE 5-10-90

Name and Address of Person Signing Officer or Director: MARY PRUSS

Title: TREASURER/DIRECTOR

Telephone Number: 813-726-3355

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

AND FILED

FLORIDA DEPARTMENT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Read Instructions on Other Side Before Making Entries

FILING FEE OF $61.25 REQUIRED

1 Name and Mailing Address of Corporation DOCUMENT # 741275 (2)

ZIP + 4 PRESORT

POSITION

SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC
329 S BAYSHORE BLVD
SAFETY HARBOR, FL 34695-4053

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2 If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address

22 P.O. Box No.

23 City and State

24 Zip Code

3 Date Incorporated or Qualified To Do Business in Florida: 12/30/1977

4 FEI Number: 59-1782315

FEI Number Applied For

FEI Number Not Applicable

5 $8.75 Additional Fee Required for a Certificate of Status

CERTIFICATE OF STATUS DESIRED

6 Names and Street Addresses of Each Officer and Director (Do not use any correction fluid or tape to cover your incorrect information.)

Title	Names of Officers and Directors	Street Address of Each Officer and Director (Do NOT use Post Office Box Numbers)	City and State
ACTING DIRECTOR	~~WHITFORD, VALERIE C.~~ MARY PRUSS	~~413 S. BAYSHORE DRIVE~~ 123 HARBOR WDS CIRCLE	SAFETY HARBOR, FL.
P/D	HORNE, LARRY	546 FIFTH ST S	SAFETY HARBOR, FL.
V/P	~~HOLLIMAN, DEAN~~ MICHAEL BATY	~~2729 PARK DRIVE~~ 737 MAIN ST.	CLEARWATER, FL
S/D	MONROE, SALLY	1611 HAMPTON LANE	SAFETY HARBOR, FL.
T/D	PRUSS, MARY	123 HARBOR WDS CIRCLE	SAFETY HARBOR, FL

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

~~WHITFORD, VALERIE C.~~ MARY PRUSS
~~413 S. BAYSHORE DRIVE~~ 123 HARBOR WOODS CIRCLE
SAFETY HARBOR, FL. 34695

8 Name and Address of New Registered Agent

6/20/91

8A Name

8B Street Address (Do NOT Use P.O. Box Number)

8C City

FL.

8D Zip Code

Pursuant to the provisions of Sections 607.050 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors.

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE Mary Pruss (Registered Agent Acceptance Required) DATE 6-13-91

To the best of my knowledge and belief, the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 6 or 7 above with an asterisk.

SIGNATURE Mary Pruss DATE 6-13-91

NAME & TITLE OF PERSON SIGNING THIS REPORT MARY PRUSS ACTING DIRECTOR

TELEPHONE NUMBER (813) 726-1668

FILING FEE OF $61.25 REQUIRED—Make Checks Payable To: Secretary of State $8.75 Additional Fee required for a Certificate of Status

Document Number Only

741275

Requestor's Name

Address

City State Zip Phone

CORPORATION(S) NAME

-11/29/91--00127--005
DOMESTIC AMENDMENTS
CERTIFIED COPY
AMENDMENT
TOTAL

FILED
91 DEC 17 PM 2:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

( ) Profit ( ) NonProfit	( ) Amendment	( ) Merger
( ) Foreign	( ) Dissolution/Withdrawal	( ) Mark
( ) Limited Partnership ( ) Reinstatement	( ) Annual Report ( ) Reservation	( ) Other ( ) Change of R.A.
( ) Certified Copy	( ) Photo Copies	( ) CUS
( ) Call When Ready ( ) Walk In ( ) Mail Out	( ) Call if Problem ( ) Will Wait	( ) After 4:30 ( ) Pick Up

Name Availability
Document Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

35-F
52.50-C

W47049

CR2E031 (1-89)

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State

December 4, 1991

SAFETY HARBOR MUSEUM
329 SOUTH BAYSHORE BLVD.
SAFETY HARBOR, FL 34695

SUBJECT: SAFETY HARBOR MUSEUM OF HISTORY & FINE ARTS, INC
Reference: 741275

Dear SIR:

We have received your document for the above corporation and your check(s) totaling $87.50. However, the document has not been filed and is being returned for the following:

If there are MEMBERS ENTITLED TO VOTE on a proposed amendment, the document must contain: (1) the date of adoption of the amendment by the members and (2) a statement that the number of votes cast for the amendment was sufficient for approval.

If there are NO MEMBERS OR MEMBERS ENTITLED TO VOTE on a proposed amendment, the document must contain: (1) a statement that there are no members or members entitled to vote on the amendment and (2) the date of adoption of the amendment by the board of directors.

If you have any questions concerning this matter, please call (904) 487-6916.

Carol Mustain
Corporate Specialist
Amendment Section

FILED
1991 DEC 17 PM 2:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12-17-91
15.75
NC amend

ARTICLES OF AMENDMENT

OF

ARTICLES OF INCORPORATION

OF

SAFETY HARBOR MUSEUM OF HISTORY AND FINE ARTS, INC.

1. The following provisions of the Articles of Incorporation of Safety Harbor Museum of History and Fine Arts, Inc., a Florida not for profit corporation, filed in Tallahassee, Florida, on December 30, 1977, be and hereby are amended in the following particulars:

ARTICLE I - NAME, be and it hereby is amended to read as follows:

"The name of the Corporation is SAFETY HARBOR MUSEUM OF REGIONAL HISTORY, INC.

ARTICLE XI - AMENDMENTS, be and it hereby is amended to read as follows:

"The Articles of Incorporation of this Corporation may be made, altered or rescinded upon a two-thirds vote of the active members present at any regular meeting or special meeting of the membership duly called for that purpose. An amendment, revision, or adoption of the By-Laws of the organization shall require a majority vote of a quorum of the Board of Directors at a meeting of the Board called for that purpose. Notice of a proposed amendment, revision or adoption of the By-Laws of the organization shall be given in writing at least ten (10) days preceding the meeting at which the proposed change or changes are to be voted upon by the Board of Directors.

2. The foregoing Amendments were adopted by the members and Directors of the Corporation at a meeting called for that purpose on the 12th day of September, 1990. Members votes being affirmative.

IN WITNESS WHEREOF, the undersigned President and Secretary

of this Corporation have executed these Articles of Amendment this 21 day of November, 1991.

Jay L. Hare
President

Sally Monroe (Sara L.)
Secretary

STATE OF FLORIDA
COUNTY OF PINELLAS

BEFORE ME, the undersigned authority, personally appeared Jay L. Hare and Sally Monroe (Sara L.) known to me to be the President and Secretary of the Corporation who executed the foregoing Articles of Amendment nd they acknowledged before me that they executed such instruments for the purposes therein stated.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 21 day of November, 1991.

Notary Public for Florida
My commission expires:

NOTARY PUBLIC, STATE OF FLORIDA
MY COMMISSION EXPIRES: NOV. 20, 1993
BONDED THRU NOTARY PUBLIC UNDERWRITERS

FILED
91 DEC 17 PM 2:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
91 DEC 17 PM 2:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1992

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

K92392

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
CLEARWATER, FLA.
FILED

FILING FEE $61.25 Make Payable To: *Secretary of State*

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation: DOCUMENT # 741275 (2)

FEI#59-1782315

SAFETY HARBOR MUSEUM OF REGIONAL HISTORY, INC.
329 S BAYSHORE BLVD
SAFETY HARBOR FL 34695-4053

If any address is incorrect in any way, line through the incorrect information and enter correct address in Block 2.

2. If Address in Block 1 is incorrect in any way, line through the incorrect information and enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Mailing Address

22 P.O. Box No.

23 City and State | 24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 12/30/1977

3a. Current Last Report: 06/20/1991

4. FEI Number: 59-1782315

FEI Number Applied For ☐

FEI Number Not Applicable ☐

5. $8.75 Certification Fee (optional) ☐

CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
1	T/D	~~TRUSS, MARY~~ Trecker, Pat	~~123 HARBOR WOODS CIR~~ 2388 Terence Ct	~~SAFETY HARBOR, FL~~ Clearwater, Fl
2	P/D	HORNE, LARRY	546 FIFTH ST S	SAFETY HARBOR, FL
3	V/P	BATY, MICHAEL	737 MAIN ST	~~CLEARWATER, FL~~ Safety Harbor, Fl
4	S/D	MONROE, SALLY	1611 HAMPTON LN	SAFETY HARBOR, FL
5				
6				

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

~~TRUSS, MARY~~
~~123 HARBOR WOODS CIR~~
~~SAFETY HARBOR, FL 34695~~

8. Name and Address of New Registered Agent

81 Name: LARRY L. Horne

82 Street Address (Do NOT Use P.O. Box Number): 546 Fifth St. S.

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City: Safety Harbor FL. | 85 Zip Code: 34695

9. Pursuant to the provisions of Section 607.0502 and 607.1509 or Section 617.0502 and 617.1509, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors or by an officer so authorized. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

Jay S Horne
New Registered Agent Authorized Signature

DATE 3/16/92

10 Is the corporation subject to the requirements of Section 5, 179 000, Florida Statutes? Yes ☐ No. ✓ (See other side for information on amount)

11 To the best of my knowledge and belief, the information contained in this annual report or supplemental annual report is true and accurate and that my signature shall serve the same legal effect as if made under oath; I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address.

SIGNATURE Jay S Horne DATE 3/16/92

LARRY L. HORNE | Acting DIRECTOR | (813) 726-1648

12

File Now. Filing Fee after May 1 is $225.00

CORPORATION
ANNUAL REPORT
1993

Secretary of State
DIVISION OF CORPORATIONS

APPROVED
SEC. OF STATE
TALLAHASSEE, FLA.
FILED

DOCUMENT # 741275 (2)

1. Current Mailing Address and Name of Corporation

SAFETY HARBOR MUSEUM OF REGIONAL HISTORY, INC.
329 BAYSHORE BLVD S
SAFETY HARBOR FL 34695-4053

PLEASE WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/30/1977
3a. Date of Last Report: 03/23/1992

FILING FEE $200.00

ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

4. FEI Number: 591782315

2. Mailing Address (21)
Suite, Apt. #, etc. (22)
City & State (23)
Zip (24) County (25)

2a. Principal Place of Business (26)
Suite, Apt. #, etc. (27)
City & State (28)
Zip (29) County (30)

5. Certificate of Status Desired ☐ — SE 7S Amount Enclosed

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ — $138.75 Supplemental Fee Not Required

8. This corporation has authority to conduct affairs in Florida Business: ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

HORNE, LARRY L.
546 FIFTH STREET SOUTH
SAFETY HARBOR FL 34695

10. Name and Address of New Registered Agent

81 Name: BARTZ, MARILYN
82 Street Address (P.O. Box Number is NOT Acceptable): 1609 HAMPTON LANE
83
84 City: Safety Harbor 85 Zip Code: 34695 86 County: PINELLAS

11. Pursuant to the provisions of Sections 617.0502 and 607.1508 of Section 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

X SIGNATURE: Marilyn K. Bartz (Registered Agent's Signature, if Changed) DATE:

12. OFFICERS AND DIRECTORS	13. OFFICERS AND DIRECTORS CHANGES
T/D TRECKER, PAT 2388 TERENCE COURT CLEARWATER FL	
P/D HORNE, LARRY 546 FIFTH ST S SAFETY HARBOR FL	P/D MARILYN BARTZ 1609 HAMPTON LANE Safety Harbor, FL 34695
V/P BATY, MICHAEL 737 MAIN ST SAFETY HARBOR FL	
S/D MONROE, SALLY 1811 HAMPTON LN SAFETY HARBOR FL	S/D DON MAHONEY 63 Harbor Woods Cir. SAFETY Harbor, FL 34695

14.

X SIGNATURE Marilyn K. Bartz

MARILYN BARTZ — PRESIDENT, BOARD OF DIRECTORS — 813-726-7217

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1994

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
94 FEB 14 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name: SAFETY HARBOR MUSEUM OF REGIONAL HISTORY, INC.

DOCUMENT # 741275 (2)

Mailing Address: 329 S BAYSHORE BLVD, SAFETY HARBOR FL 34695-4053

Principal Place of Business: 329 S BAYSHORE BLVD, SAFETY HARBOR FL 34695-4053

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/30/1977

3a. Date of Last Report: 03/26/1993

4. FEI Number: 59-1782315 — Applied For / Not Applicable

5. Certificate of Status Desired: $8.75 ☐

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

7. Nonprofit Exempt from $138.75 Supplemental Fee ☑

8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☐ No

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. Mailing Address (21) — 2a. Principal Place of Business (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) — Zip (29) Country (30)

9. **Name and Address of Current Registered Agent**

BARTZ MARILYN
1609 HAMPTON AVE
SAFETY HARBOR FL 34695

10. **Name and Address of New Registered Agent**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505 or 617.0503, Florida Statutes.

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS	13. CHANGES TO OFFICERS AND DIRECTORS IN 12
T/D TRECKER, PAT 2388 TERENCE COURT CLEARWATER FL	T/D Wood, CAROl 5 Villa Court Safety Harbor, Fl 34695
P/D BARTZ MARILYN 1609 HAMPTON AVE SAFETY HARBOR FL	P/D ~~Marilyn~~ BArTz, MARilyN 1609 HAMPTON LA Safety Harbor, Fl 34695
V/P BATY, MICHAEL 737 MAIN ST SAFETY HARBOR FL	V/P WATERS, GUY 5637 CASINO DR Holiday, Fl 34690
S/D MAHONEY DON 83 HARBOR WOODS CIR. SAFETY HARBOR FL	S/D Hougland, MARGE 1104 Kensington Ct. Safety Harbor, Fl 34695

14. I certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. [illegible] 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 607 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment [illegible]

SIGNATURE: Marilyn K Bartz MARILYN K. BARTZ 2-7-94 (813) 726-7537

FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

ANNUAL REPORT
1995

DOCUMENT # 741275 (2)

SAFETY HARBOR MUSEUM OF REGIONAL HISTORY, INC.

95 MAR -3 AM 9:02

DO NOT WRITE IN THIS SPACE

Business	Mailing Address
329 S BAYSHORE BLVD SAFETY HARBOR FL 34695-4053	329 S BAYSHORE BLVD SAFETY HARBOR FL 34695-4053

3. Date Incorporated or Qualified: 12/30/1977
3a. Date of Last Report: 02/14/1994
4. FEI Number: 59-1782315

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofits with IRS 501(c)(3) Tax Exempt Status ☑ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

BARTZ MARILYN
1609 HAMPTON AVE
SAFETY HARBOR FL 34695

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the obligations of Section 607.0505, Florida Statutes.

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
TD WOOD, CAROL 5 VILLA CT SAFETY HARBOR FL	☑ Change TD MAXON, SUSAN H. 2712 Deagle Pathway ~~Palm Harbor, FL 34683~~
PD BARTZ, MARILYN 1609 HAMPTON AVE SAFETY HARBOR FL	☐ Change
VP WATERS, GUY 5637 CASINO DR HOLIDAY FL	☑ Change VD SHUGART, TOBY 104 Woodcreek Dr. Safety Harbor, FL 34695
SD HOUGLAND, MARGE 1104 KENSINGTON CT SAFETY HARBOR FL	☑ Change SD MARN, JACQUELINE, 2758 Sand Hollow Court Clearwater, FL 34621
	☐ Change
	☐ Change

SIGNATURE: Marilyn Bartz [signature] 2-27-1995