2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#751485

FILED Jan 06, 2009 Secretary of State

Entity Name: FLORIDA HUMANITIES COUNCIL, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 599 2ND STREE SOUTH 599 2ND STREET SOUTH SAINT PETERSBURG, FL 337015005 US SAINT PETERSBURG, FL 337015005 US **Current Mailing Address: New Mailing Address:** 599 2ND STREE SOUTH 599 2ND STREET SOUTH SAINT PETERSBURG, FL 337015005 US SAINT PETERSBURG, FL 337015005 US FEI Number: 23-7304964 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FARVER, JANINE 599 2ND STREET S SAINT PETERSBURG, FL 33701 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 Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LESTER, ABBERGER Name: Name: P.O. BOX 1168 Address: Address: City-St-Zip: TALLAHASSEE, FL 32315 City-St-Zip: Title: () Delete Title: (X) Change () Addition WARD, JON Name: WARD, JON Name: Address: P.O. BOX 13024 Address: 108 NORTH DEPOT DRIVE City-St-Zip: FORT PIERCE, FL 34979 City-St-Zip: FORT PIERCE, FL 34950 Title: () Delete Title: () Change () Addition BILLINGSLEY, FRANK Name: Name: 400 S. ORANGE AVE 6TH FLOR Address: Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: COLBURN, DAVID Name: FARVER, JANINE Address: P.O BOX 117320 Address: 2117 SOUTHVIEW AVE City-St-Zip: GAINESVILLE, FL 32611 City-St-Zip: TAMPA, FL 33606

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JANINE FARVER O 01/06/2009