

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758187

FILED
Feb 24, 2010
Secretary of State

Entity Name: WEST STATE ARCHAEOLOGICAL SOCIETY, INC.

Current Principal Place of Business:

724 W.109TH AVE.
TAMPA, FL 33612 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 17365
TAMPA, FL 336827374 US

New Mailing Address:

2420 W BRANDON BLVD
213
BRANDON, FL 33511

FEI Number: 59-2435378

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHEMITSCH, RICHARD
309 E 137TH AVE
TAMPA, FL 33613 US

Name and Address of New Registered Agent:

RAMOS, GENE
2420 W BRANDON BLVD
213
BRANDON, FL 33511 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: GENE RAMOS

02/24/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: LIVINGSTON, CRAIG
Address: 10108 LINDA STREET
City-St-Zip: GIBSONTOWN, FL 33534 US

Title: TREA
Name: RAMOS, GENE
Address: 2420 W BRANDON BLVD 213
City-St-Zip: BRANDON, FL 33511 US

Title: BRD
Name: GRANGER, BRENT D
Address: 15031 ARBUNS RESERVE CR., APT162
City-St-Zip: TAMPA, FL 33618 US

Title: VP
Name: BARRY, INMAN
Address: 5102 N. 22ND STREET
City-St-Zip: TAMPA, FL 33610 US

Title: BRD.
Name: SCOGGINS, SAM
Address: 718 BELT CT
City-St-Zip: TAMPA, FL 33012 US

Title: BRD.
Name: INMAN, TAMMY
Address: 5102 N. 22ND STREET
City-St-Zip: TAMPA, FL 33610

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: GENE RAMOS

TRES

02/24/2010

Electronic Signature of Signing Officer or Director

Date