

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000991

FILED  
Apr 28, 2011  
Secretary of State

**Entity Name:** A.L. LEWIS HISTORICAL SOCIETY, INC.

**Current Principal Place of Business:**

5531 GREGG STREET  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 15563  
FERNANDINA BEACH, FL 32035

**New Mailing Address:**

FEI Number: 59-3672494

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALEXANDER, CAROL J  
829 NORTH DAVIS STREET  
JACKSONVILLE, FL 32202 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: ALEXANDER, CAROL  
Address: 829 NORTH DAVIS STREET  
City-St-Zip: JACKSONVILLE, FL 32202

Title: V  
Name: FRINK, NEIL  
Address: 85306 AMAGANSETT DRIVE  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: S  
Name: WALKER, VIOLA  
Address: 5430 GREGG STREET  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: T  
Name: WATERS, RUTH  
Address: 5531 GREGG STREET  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D  
Name: JONES, CARLTON  
Address: 5381 HALA CT  
City-St-Zip: JACKSONVILLE, FL 32224

Title: D  
Name: JONES, EVE  
Address: 1748 JULIA STREET  
City-St-Zip: FERNANDINA BEACH, FL 32034

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: CAROL J. ALEXANDER

P

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date