

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Mar 02, 2008  
Secretary of State

DOCUMENT# N01000006312

Entity Name: FLORIDA EAST COAST RAILWAY SOCIETY, INC.

**Current Principal Place of Business:**

409 17TH STREET  
SAINT AUGUSTINE, FL 32084 US

**New Principal Place of Business:**

526 CYPRESS CIRCLE  
TEQUESTA, FL 33469 US

**Current Mailing Address:**

PO BOX 4038  
SAINT AUGUSTINE, FL 320854038 US

**New Mailing Address:**

526 CYPRESS CIRCLE  
TEQUESTA, FL 33469 US

FEI Number: 22-3842555

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HOLTHOFF, CHARLES  
409 17TH STREET  
SAINT AUGUSTINE, FL 320841516 US

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

KOVALSKY, JAMES M  
526 CYPRESS CIRCLE  
TEQUESTA, FL 33469 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: JAMES M KOVALSKY

03/02/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SHORES, RICHARD  
Address: 2652 NE 4TH COURT  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D ( ) Delete  
Name: HOLTHOFF, CHARLES  
Address: 409 17 STREET  
City-St-Zip: ST AUGUSTINE, FL 320841516

Title: D ( ) Delete  
Name: VOLLSTEDT, JAY  
Address: 6152 TERRA ROSA CIRCLE  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: KOVALSKY, JAMES M  
Address: 526 CYPRESS CIRCLE  
City-St-Zip: TEQUESTA, FL 33469 US

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: JAMES M KOVALSKY

D

03/02/2008

Electronic Signature of Signing Officer or Director

Date