2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006312

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

526 CYPRESS CIRCLE

TEQUESTA, FL 33469 US

() Delete

Entity Name: FLORIDA EAST COAST RAILWAY SOCIETY, INC.

FILED Apr 25, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
	ESS CIRCLE A, FL 33469	US	19511 TRAILS END TERR JUPITER, FL 33458 US				
Current Mailing Address:				New Mailing Address:			
526 CYPRESS CIRCLE TEQUESTA, FL 33469 US		US	19511 TRAILS END TERR JUPITER, FL 33458 US				
FEI Number:	: 22-3842555	FEI Number Applied For ()	FEI Number	Not Appli	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
KOVALSKY, JAMES M 526 CYPRESS CIRCLE TEQUESTA, FL 33469 US			19	KOVALSKY, JAMES M 19511 TRAILS END TERR JUPITER, FL 33458 US			
	named entity see of Florida.	ubmits this statement for the p	urpose of ch	anging it	s registere	ed office or registered agent, or both,	
SIGNATURE:				04/25/2009			
	Electron	ic Signature of Registered Age	nt			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	D () SHORES, RICH. 2652 NE 4TH CO BOYNTON BEAC	OURT			D WINTER, C 7265 SW 8 MIAMI, FL	9TH ST., APT. 514	
Title: Name: Address: City-St-Zip:	HOLTHOFF, CH 409 17 STREET				D KOVALSKY 19511 TRA JUPITER, F	ILS END TERR	
Title: Name: Address: City-St-Zip:	D () VOLLSTEDT, JA 6152 TERRA RO BOYNTON BEAG	DSA CIRCLE				(X) Change () Addition), JAMES INA AVENUE BEACH, FL 32174	
Title: Name:	D () KOVALSKY, JAN	Delete MES M	Title Nar		D STARCK, M	(X) Change()Addition /ICHAEL	

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.

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

12725 93RD STREET

BURNS, WILLIE

FELLSMERE, FL 32948 US

810 MASON AVENUE #31

DAYTONA BEACH, FL 32117

() Change (X) Addition

SIGNATURE: JAMES KOVALSKY D 04/25/2009