

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005951

FILED
Jan 05, 2009
Secretary of State

Entity Name: OAKLAND PARK HISTORICAL SOCIETY, INC.

Current Principal Place of Business:

JOANNE POWELL
702 NE 33RD STREET
FORT LAUDERDALE, FL 33334

New Principal Place of Business:

JOANNE POWELL
702 NE 33RD STREET
OAKLAND PARK, FL 33334

Current Mailing Address:

JOANNE POWELL
702 NE 33RD STREET
FORT LAUDERDALE, FL 33334

New Mailing Address:

JOANNE POWELL
702 NE 33RD STREET
OAKLAND PARK, FL 33334

FEI Number: 13-4206740

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWELL, JOANNE
702 NE 33RD STREET
FORT LAUDERDALE, FL 33334 US

Name and Address of New Registered Agent:

POWELL, JOANNE
702 NE 33RD STREET
OAKLAND PARK, FL 33334 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: JOANNE H. POWELL

01/05/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCHECKWITZ, TERRY
Address: 1541 NE 34 COURT
City-St-Zip: OAKLAND PARK, FL 33334

Title: D () Delete
Name: HENRY, FRED
Address: 315 NW 40 COURT
City-St-Zip: OAKLAND PARK, FL 33309

Title: TD () Delete
Name: POWELL, JOANNE
Address: 702 NE 33 STREET
City-St-Zip: OAKLAND PARK, FL 33334

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:

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: JOANNE H. POWELL

TD

01/05/2009

Electronic Signature of Signing Officer or Director

Date