

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 27, 2009
Secretary of State**

DOCUMENT# N16109

Entity Name: HISTORIC LAKE WALES SOCIETY INC.

Current Principal Place of Business:

325 S. SCENIC WAY.
LAKE WALES, FL 33853

New Principal Place of Business:

Current Mailing Address:

325 S. SCENIC WAY.
LAKE WALES, FL 33853

New Mailing Address:

FEI Number: 59-2803658 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDMAN, MARY LEIGH
300 LAKESHORE BLVD.
LAKE WALES, FL 33853 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: D () Delete
Name: HARDMAN, MARY LEIGH
Address: 300 LAKESHORE BLVD.
City-St-Zip: LAKE WALES, FL

Title: D () Delete
Name: PORTER, W. SIDNEY
Address: 842 GOLDEN BOUGH ROAD
City-St-Zip: LAKE WALES, FL

Title: D () Delete
Name: WATERS, CHRISTINE BRYAN
Address: BRYAN GROVES
City-St-Zip: BABSON PARK, FL

Title: D () Delete
Name: HARDMAN, WILLIAM M.
Address: 300 LAKESHORE BLVD.
City-St-Zip: LAKE WALES, FL

Title: D () Delete
Name: WHEELER, LEE A III
Address: 228 S. 4TH ST.
City-St-Zip: LAKE WALES, FL

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: () 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: MARY LEIGH HARDMAN

D

03/27/2009

Electronic Signature of Signing Officer or Director

Date