

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 21, 2009  
Secretary of State**

DOCUMENT# N37989

Entity Name: DESOTO COUNTY HISTORICAL SOCIETY, INC.

**Current Principal Place of Business:**

914 MIZELL AVE  
ARCADIA, FL 34266 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1824  
ARCADIA, FL 34265 US

**New Mailing Address:**

FEI Number: 59-3018187      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

WILSON, LUKE  
914 MIZELL AVE  
ARCADIA, FL 34266 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 ( ) Delete  
Name: MCGAVIE, MITZIE  
Address: POB 1824  
City-St-Zip: ARCADIA, FL 34265

Title: VP ( ) Delete  
Name: HIGLEY, KAY  
Address: 427 W HICKORY ST  
City-St-Zip: ARCADIA, FL 34266

Title: S ( ) Delete  
Name: SHORE, CLEL  
Address: 2692 NE HWY 70 #658  
City-St-Zip: ARCADIA, FL 34266

Title: T ( ) Delete  
Name: CONLEY, ARLENE  
Address: 5173 NE MASTERS AVE  
City-St-Zip: ARCADIA, FL 34266

Title: D ( ) Delete  
Name: HIGLEY, LEONARD  
Address: 427 W HICKORY ST  
City-St-Zip: ARCADIA, FL 34266

Title: D ( ) Delete  
Name: BEDELL, DR. DAVID  
Address: P.O. BOX 30  
City-St-Zip: ARCADIA, FL 34266

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

Title: P (X) Change ( ) Addition  
Name: MCGAVIC, MITZIE  
Address: POB 1824  
City-St-Zip: ARCADIA, FL 34265

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

Title: S (X) Change ( ) Addition  
Name: REYNOLDS, FOREST  
Address: 4671 SW WOOD ST  
City-St-Zip: ARCADIA, FL 34266

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

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

Title: D (X) Change ( ) Addition  
Name: SHORE, CLEL  
Address: 2692 NE HWY 70, LOT#658  
City-St-Zip: ARCADIA, FL 34266

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: ARLENE CONLEY

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

T

01/21/2009

\_\_\_\_\_  
Date