

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002010

FILED
Jan 13, 2004
Secretary of State

Entity Name: OCALA MODEL RAILROADERS HISTORIC PRESERVATION SOCIETY INCORPORATED

Current Principal Place of Business:

812 NE TUSCAWILLA AVE
OCALA, FL 34470

New Principal Place of Business:

Current Mailing Address:

P O BOX 6235
OCALA, FL 344786235

New Mailing Address:

FEI Number: 65-0739660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANZONE, JAMES L
3380 SE 2ND CT
OCALA, FL 34471 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: MANZONE, JAMES L
Address: 3380 SE 2 COURT
City-St-Zip: OCALA, FL 344715179

Title: D () Delete
Name: PRIEST, GEORGE
Address: 9832 NE 23 COURT
City-St-Zip: ANTHONY, FL 32617

Title: D () Delete
Name: RUDD, MARSHALL
Address: 1810 NE 61 ST
City-St-Zip: OCALA, FL 34479

Title: D () Delete
Name: BERKELEY, EDMUND C
Address: 3823 SE 11 PLACE
City-St-Zip: OCALA, FL 34471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: KRAMER, RICHARD
Address: 5230 NW 144TH PLACE
City-St-Zip: LOWELL, FL 32663

Title: D (X) Change () Addition
Name: SEBASTIANO, CARMEN J
Address: 5908 SW 108TH STREET
City-St-Zip: OCALA, FL 34476

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 L. MANZONE

D

01/13/2004

Electronic Signature of Signing Officer or Director

Date