

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 715611

**Entity Name:** BOYNTON BEACH HISTORICAL SOCIETY, INC.**Current Principal Place of Business:**806 EAST WINDWARD WAY  
PH 08  
LANTANA, FL 33462**Current Mailing Address:**P.O. BOX 12  
BOYNTON BEACH, FL 33425 US**FEI Number: 59-2465514****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MCKERAL, FRANCES  
121 NW 1ST AVENUE  
BOYNTON BEACH, FL 33435 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	P.
Name	DEVRIES, JANET
Address	806 EAST WINDWARD WAY PH 08
City-State-Zip:	LANTANA FL 33462
Title	S
Name	DENNIS, DIANA
Address	1725 S.W. 17TH STREET
City-State-Zip:	BOYNTON BEACH FL 33426
Title	T
Name	MCKERAL, FRANCES
Address	121 NW 1ST AVENUE
City-State-Zip:	BOYNTON BEACH FL 33435

Title	VP
Name	PEDERSEN, GINGER DR.
Address	7817 MANOR FOREST LANE
City-State-Zip:	BOYNTON BEACH FL 33436
Title	CS
Name	WATTS, ANNE
Address	4584 BLUE PINE CIRCLE
City-State-Zip:	LAKE WORTH FL 33463
Title	2ND VP
Name	SMITH, VONCILE M DR.
Address	1747 BANYAN CREEK COURT
City-State-Zip:	BOYNTON BEACH FL 33436

I hereby 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 all other like empowered.

**SIGNATURE: DR. VONCILE M. SMITH****2ND VICE PRESIDENT****04/29/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date