

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721272

Entity Name: HISTORICAL SOCIETY OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

65 E CENTRAL BLVD
ORLANDO, FL 32801

Current Mailing Address:

65 E CENTRAL BLVD
ORLANDO, FL 32801

FEI Number: 59-1860444

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

VAN ARSDEL, SARA
65 E. CENTRAL
ORLANDO, FL 32801 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 | T | Title | CHAIRMAN |
| Name | GRIFFITHS, BARRY | Name | MCAKEAVEY, THOMAS |
| Address | 65 E CENTRAL BLVD | Address | 65 E CENTRAL BLVD |
| City-State-Zip: | ORLANDO FL 32801 | City-State-Zip: | ORLANDO FL 32801 |
| | | | |
| Title | PRESIDENT | Title | DIRECTOR |
| Name | FINKELSTEIN, ANDREW | Name | VAN ARSDEL, SARA |
| Address | 65 E CENTRAL BLVD | Address | 65 E CENTRAL BLVD |
| City-State-Zip: | ORLANDO FL 32801 | City-State-Zip: | ORLANDO FL 32801 |

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: SARA VANARSDDEL

EXEC DIRECTOR

01/23/2014

Electronic Signature of Signing Officer/Director Detail

Date