2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751485

Entity Name: FLORIDA HUMANITIES COUNCIL, INCORPORATED

FILED Feb 26, 2019 Secretary of State 8747156350CC

Date

Current Principal Place of Business:

599 2ND STREET SOUTH

SAINT PETERSBURG, FL 33701-5005

Current Mailing Address:

599 2ND STREET SOUTH

SAINT PETERSBURG, FL 33701-5005 US

FEI Number: 23-7304964 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLORIDA HUMANITIES COUNCIL, INC 599 2ND STREET S SAINT PETERSBURG, FL 33701 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: BRENDA O'HARA 02/26/2019

Electronic Signature of Registered Agent

Officer/Director Detail:

Title **CHAIRMAN** Title **EXECUTIVE DIRECTOR**

FLETCHER, CASEY SEIBERT, STEVE Name Name 301 SECOND ST N P.O. BOX 819 Address Address

BARTOW FL 33831 City-State-Zip: City-State-Zip: TALLAHASSEE FL 33701

Title ASSOCIATE DIRECTOR Title **CFO**

PUTMAN, PATRICIA Name O'HARA, BRENDA Name Address **6319 29TH STREET S**

6530 CAPE HATTERAS WAY NE Address

City-State-Zip:

ST PETERSBURG FL 33702

City-State-Zip: ST. PETERSBURG FL 33712 UNIT 2

Title **SECRETARY** Title **DIRECTOR**

Name HARBAUGH, JOSEPH Address 1121 PIERSON DR

Address 9801 NW 35TH STREET City-State-Zip: LYNN HAVEN FL 32444 HOLLYWOOD FL 33024

City-State-Zip: Title **TREASURER** RIEF, SANDY Name

Address 2611 BAYSHORE BLVD

WALTERS, GLENDA

APT 907

City-State-Zip: TAMPA FL 33629

Name

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.

02/26/2019 SIGNATURE: BRENDA O'HARA CHIEF FINANCIAL **OFFICER**

Electronic Signature of Signing Officer/Director Detail

Date