

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758187

Entity Name: WEST STATE ARCHAEOLOGICAL SOCIETY, INC.**Current Principal Place of Business:**724 W.109TH AVE.
TAMPA, FL 33612**Current Mailing Address:**10108 LINDA STREET
GIBSONTON, FL 33534 US**FEI Number:** 59-2435378**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LIVINGSTON, CRAIG S
10108 LINDA STREET
GIBSONTON, FL 33534 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:** CRAIG LIVINGSTON

02/19/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRES
Name	HARDEN, TOM
Address	12307 N TALIAFERRO AVE
City-State-Zip:	TAMPA FL 33612

Title	TREA
Name	LIVINGSTON, CRAIG
Address	10108 LINDA ST
City-State-Zip:	GIBSONTON FL 33534

Title	BRD
Name	GRANGER, BRENT D
Address	15031 ARBUNS RESERVE CR., APT162
City-State-Zip:	TAMPA FL 33618

Title	VP
Name	SACKMAN, JASON
Address	2948 MINUTEMAN LANE
City-State-Zip:	BRANDON FL 33511

Title	BRD.
Name	SCOGGINS, SAM
Address	718 BELT CT
City-State-Zip:	TAMPA FL 33012

Title	BRD.
Name	LIVINGSTON, CHARLIE
Address	3102 N AVENIDA REPUBLICA
City-State-Zip:	TAMPA FL 33605

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: CRAIG LIVINGSTON**TREASURER**

02/19/2014

Electronic Signature of Signing Officer/Director Detail

Date