

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED

DOCUMENT# N00000007881

Jan 17, 2023

Entity Name: FLAGLER BEACH HISTORICAL MUSEUM, INC.

**Secretary of State
5923446678CC**

Current Principal Place of Business:

207 S. CENTRAL AVE.
FLAGLER BEACH, FL 32136

Current Mailing Address:

PO BOX 2136
FLAGLER BEACH, FL 32136

FEI Number: 91-2090531

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KING, PATRICIA LOUISE MS
1919 S FLAGLER AVENUE
FLAGLER BEACH, FL 32136 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: PATRICIA L KING

01/17/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CREAL, ROBERT R
Address 301 N. 5TH ST.
City-State-Zip: FLAGLER BEACH FL 32136

Title VP
Name DUNCAN, TOM
Address 2201 S. CENTRAL AVE.
City-State-Zip: FLAGLER BEACH FL 32136

Title DIRECTOR
Name DALECKI, CINDY
Address 61 CAPISTRANO DRIVE
City-State-Zip: ORMOND BEACH FL 32176

Title EXECUTIVE DIRECTOR
Name KING, PATRICIA
Address 1919 S FLAGLER AVENUE
City-State-Zip: FLAGLER BEACH FL 32136-3720

Title DIRECTOR
Name LEOPARD, JULIE
Address 2644 OCEANSHORE BLVD.
City-State-Zip: FLAGLER BEACH FL 32136

Title TREASURER
Name HELMS, KYME
Address 3053 PAINTERS WALK
City-State-Zip: FLAGLER BEACH FL 32136

Title DIRECTOR
Name FISHER, CAROL
Address 1616 S. OCEANSHORE BLVD.
City-State-Zip: FLAGLER BEACH FL 32136

Title DIRECTOR
Name SIEPIETOSKI, SANDRA
Address 2001 PALM DRIVE
 UNIT H102
City-State-Zip: FLAGLER BEACH FL 32136

Continues on page 2

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: PATRICIA L KING

EXECUTIVE DIRECTOR

01/17/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY
Name VOGEL, CATHLEEN
Address 5759 JOHN ANDERSON HIGHWAY
City-State-Zip: FLAGLER BEACH FL 32136