

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000007620

**FILED**  
**Jan 03, 2018**  
**Secretary of State**  
**CC6964965478**

**Entity Name:** TRAIL OF FLORIDA'S INDIAN HERITAGE, INC.

**Current Principal Place of Business:**

3020 CAMBRIDGE DRIVE  
SARASOTA, FL 34232

**Current Mailing Address:**

P.O. BOX 778  
DUNEDIN, FL 34697

**FEI Number: 33-1028180**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

DEAN, LAURA  
3020 CAMBRIDGE DR  
SARASOTA, FL 34232 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: LAURA DEAN**

**01/03/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title T  
Name FEKETE, RONALD  
Address 1041 SAN SALVADOR DR  
City-State-Zip: DUNEDIN FL 34698

Title D  
Name ARDREN, MARTHA  
Address 35303 SW 180 AVE #412  
City-State-Zip: FLORIDA CITY FL 33034

Title PRESIDENT  
Name THOMIN, MIKE  
Address D.A.R.C.  
207 E MAIN STREET  
City-State-Zip: PENSACOLA FL 32502-6034

Title DIRECTOR  
Name TAMARA, ALLEN  
Address PO BOX 0666  
City-State-Zip: CARABELLE FL 32322

Title VP  
Name SVEKIS, SHERRY  
Address 835 S OSPREY AVE  
APT 402  
City-State-Zip: SARASOTA FL 34236

Title SECRETARY  
Name BELL, AUSTIN  
Address MARCO ISLAND HISTORICAL  
SOCIETY  
180 HEATHWOOD DR.  
City-State-Zip: MARCO ISLAND FL 34145

Title DIRECTOR  
Name KHAKZAD, SORNA  
Address 207 E MAIN STREET  
City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR  
Name KITE-POWELL, RODNEY  
Address TAMPA BAY HISTORY CENTER  
801 OLD WATER ST  
City-State-Zip: TAMPA FL 33602

**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: LAURA DEAN**

**EXEC DIRECTOR**

**01/03/2018**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title EXEC DIRECTOR

Name DEAN, LAURA

Address 3020 CAMBRIDGE DRIVE

City-State-Zip: SARASOTA FL 34232