# 2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N09000008047

Entity Name: THE CHAPMAN HOUSE MUSEUM, INC.

FILED
Jun 10, 2019
Secretary of State
3989121725CC

#### **Current Principal Place of Business:**

**82 SIXTH STREET** 

APALACHICOLA, FL 32320

## **Current Mailing Address:**

82 SIXTH STREET

APALACHICOLA, FL 32320 US

FEI Number: 27-1147753 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

TUDOR, HELEN E.A. DR 2285 HWY 98 W CARRABELLE, FL 32322 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 PRESIDENT Title VP

Name TUDOR, HELEN E.A. DR. Name VER PLOEG, CHRISTINE PROF.

Address 2285 HWY 98 W Address 12 RED FOX ROAD

City-State-Zip: CARRABELLE FL 32322 City-State-Zip: SAINT PAUL MN 55127

Title TRUSTEE Title TRUSTEE

NameSOCCI, MARY DR.NameMAZYCK, ELIZABETH M DR.Address26 DOUBLOON DRIVEAddress2159 WOODLEY ROADCity-State-Zip:HILTON HEAD ISLAND SC 29928City-State-Zip: MONTGOMERY AL 36111

Title TRUSTEE Title TRUSTEE

NameMAZYCK, ARTHUR DR.NameWATKINS III, STEVE M ESQ.Address2159 WOODLEY ROADAddress41 COMMERCE STREETCity-State-Zip:MONTGOMERY AL 36111City-State-Zip: APALACHICOLA FL 32320

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: DR. HELEN E.A. TUDOR

**PRESIDENT** 

06/10/2019