

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000004966

Entity Name: ROBERT W. WILLAFORD RAILROAD MUSEUM SOCIETY, INC.**Current Principal Place of Business:**102 N. PALMER STREET
PLANT CITY, FL 33563**Current Mailing Address:**102 N. PALMER STREET
PLANT CITY, FL 33563**FEI Number: 47-1015227****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**COTTON, DANIEL M ESQUIRE
102 N. PALMER STREET
PLANT CITY, FL 33563 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
Name BARBER, T. ERIC
Address 102 N. PALMER STREET
City-State-Zip: PLANT CITY FL 33563

Title VP
Name PASSMORE, MARSHA
Address 102 N. PALMER STREET
City-State-Zip: PLANT CITY FL 33563

Title SECRETARY
Name LYONS, GAIL
Address 102 N. PALMER STREET
City-State-Zip: PLANT CITY FL 33563

Title TREASURER
Name GALES, SUSAN
Address 102 N. PALMER STREET
City-State-Zip: PLANT CITY FL 33563

Title DIRECTOR
Name LUBRANO, BENITO JR.
Address 102 N. PALMER STREET
City-State-Zip: PLANT CITY FL 33563

Title BOARD MEMBER
Name SCOTT, JIM
Address 102 N. PALMER STREET
City-State-Zip: PLANT CITY FL 33563

Title BOARD MEMBER
Name POGUE, PAT
Address 102 N. PALMER STREET
City-State-Zip: PLANT CITY FL 33563

Title BOARD MEMBER
Name WOODS, ROBERT
Address 102 N. PALMER STREET
City-State-Zip: PLANT CITY FL 33563

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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: SUSAN S. GALES**TREASURER****04/17/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title BOARD MEMBER
Name WATSON, LEO
Address 102 N. PALMER STREET
City-State-Zip: PLANT CITY FL 33563

Title BOARD MEMBER
Name DARAMUS, TOM
Address 102 N. PALMER STREET
City-State-Zip: PLANT CITY FL 33563

Title BOARD MEMBER
Name TRUNZO, FRANK
Address 102 N. PALMER STREET
City-State-Zip: PLANT CITY FL 33563

Title BOARD MEMBER
Name LAURELLI, TENNILLE
Address 102 N. PALMER STREET
City-State-Zip: PLANT CITY FL 33563

Title BOARD MEMBER
Name FISHER, MARY
Address 102 N. PALMER STREET
City-State-Zip: PLANT CITY FL 33563