#### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37989

Entity Name: DESOTO COUNTY HISTORICAL SOCIETY, INC.

FILED Apr 29, 2024 Secretary of State 5945063808CC

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

300 NORTH MONROE AVENUE

ARCADIA, FL 34266

### **Current Mailing Address:**

PO BOX 1824

ARCADIA, FL 34265 US

FEI Number: 59-3018187 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

WILSON, LUKE 914 MIZELL AVE ARCADIA, FL 34266 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 CLINE, ADRIAN Name KEEN, VERNON

Address PO BOX 1882 Address 3495 SE HANSEL AVE.

City-State-Zip: ARCADIA FL 34265 City-State-Zip: ARCADIA FL 34266

Title S Title T

Name COLLINS, RENÉ Name ERICKSON, NANCY

Address 6227 SW SMITH AVE. Address 8369 SW LIVERPOOL RD.

City-State-Zip: ARCADIA FL 34266 City-State-Zip: ARCADIA FL 34269

Title D Title D

Name WILSON, LUKE Name MAHLER, CAROL Address 914 MIZELL AVE. Address P.O. BOX 644

City-State-Zip: ARCADIA FL 34266 City-State-Zip: NOCATEE FL 34268

TitleDIRECTORTitleDIRECTORNameGRIFFIS, JEFFNameHUTSON, ELLENAddress5288 NW COKER ST.Address4875 SE TOMLIN DR.

City-State-Zip: ARCADIA FL 34266 City-State-Zip: ARCADIA FL 34266

## 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: CAROL MAHLER DIRECTOR 04/29/2024

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR

Name PARKER, STELLA

Address P.O. BOX 1441

City-State-Zip: ARCADIA FL 34265

Title DIRECTOR

Name DUNN, RUTH

Address PO BOX 3188

City-State-Zip: ARCADIA FL 34265

Title DIRECTOR

Name NORMA, BANAS

Address 2030 S.E. ALLI TERRACE

City-State-Zip: ARCADIA FL 34266