2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006747

Entity Name: ESTERO HISTORICAL SOCIETY, INC.

FILED
Jan 14, 2015
Secretary of State
CC7162762363

Current Principal Place of Business:

9200 CORKSCREW PALMS ESTERO, FL 33928

Current Mailing Address:

P.O. BOX 1314 ESTERO. FL 33929

FEI Number: 65-0962691 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRYAL, DAVID 20098 BALLYLEE CT ESTERO, FL 33928 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: BEVERLY A. MACNELLIS

Electronic Signature of Registered Agent

01/14/2015 Date

Officer/Director Detail:

Title PRESIDENT Title D

NameMORRIS, ROBERTNameNEWBERRY, SISAddress4907 BROADWAY WAddress4946 MEDERIA LNCity-State-Zip:ESTERO FL 33928City-State-Zip:ESTERO FL 33928

Title VP Title T

Name PRYAL, JEAN I Name PRYAL, DAVID

Address 20098 BALLYLEE CT Address 20098 BALLYLEE CT.

City-State-Zip: ESTERO FL 33928 City-State-Zip: ESTERO FL 33928

Title SECRETARY Title DIRECTOR

Name FERNANDEZ, PAMELA Name WEENEN, MARYANN

Address 18361 ORIOLE RD. Address 20680 HORSE HAAME HOLLOW

City-State-Zip: FT MYERS FL 33967 City-State-Zip: ESTERO FL 33928

TitleDIRECTORTitleDIRECTORNameEILEEN GALVINNameKEN WISEN

Address 20954 COUNTRY BARN DR. Address 3715 STONE WAY

City-State-Zip: ESTERO FL 33928

City-State-Zip: ESTERO FL 33928

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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: DAVID M. PRYAL TREASURER 01/14/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

NameMARLENE FERNANDEZAddress20280 TRAILSIDE DR.City-State-Zip:ESTERO FL 33928