

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006747

Entity Name: ESTERO HISTORICAL SOCIETY, INC.**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:**BOUDREAU, ROBERT J
23820 AMALFI COAST RD., #202
ESTERO, FL 34135 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:** ROBERT J. BOUDREAU

03/10/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name DAURAY, CHARLES
Address P.O. BOX 1314
City-State-Zip: ESTERO FL 33929

Title DIRECTOR
Name NEWBERRY, SIS
Address P.O. BOX 1314
City-State-Zip: ESTERO FL 33929

Title VP
Name MACNELLIS, BEVERLY I
Address P.O. BOX 1314
City-State-Zip: ESTERO FL 33929

Title TREASURER
Name BOUDREAU, ROBERT J
Address P.O. BOX 1314
City-State-Zip: ESTERO FL 33929

Title SECRETARY
Name FERNANDEZ, PAMELA
Address P.O. BOX 1314
City-State-Zip: ESTERO FL 33929

Title DIRECTOR
Name WEENEN, MARYANN
Address P.O. BOX 1314
City-State-Zip: ESTERO FL 33929

Title DIRECTOR
Name EILEEN GALVIN
Address P.O. BOX 1314
City-State-Zip: ESTERO FL 33929

Title DIRECTOR
Name KEN WISEN
Address P.O. BOX 1314
City-State-Zip: ESTERO FL 33929

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: ROBERT J. BOUDREAU

TREASURER

03/10/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MARLENE FERNANDEZ
Address	P.O. BOX 1314
City-State-Zip:	ESTERO FL 33929