2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Jan 22, 2007 8:00 am Secretary of State

Inn. 11, 2006 941-747-1998

Daytime Phone #

| DOCUMENT # 702002 1. Entity Name HERNANDO DE SOTO HISTORICAL SOCIETY, INC. | | | | | | | | (| 01-22-2007 | 90086 02 | 28 ****61. | 25 |
|--|------------------------------------|--|---------------------------|---|-----------------------|--|--|-------------------------------------|---------------------|-------------------------------|----------------|-----------------------------|
| Principal Place of Business 910 3RD AVE W BRADENTON, FL 34205 | | | | Mailing Address 910 3RD AVE W BRADENTON, FL 34205 | | | | | | | | |
| Principal Place of Business - No P.O. Box # 3. Mailing Address | | | | | | | | | | | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | | 01032007 | Chg-NP | CR2E | 037 (12/06) | |
| City & State | | | City & State | | | | | 4. FEI Number 59-0649981 | | | | oplied For ot Applicable |
| Zip | Country | | Zip | | Cou | ıntry | 5. Certificate of Status Des | | Status Desired | S8.75 Additional Fee Required | | |
| 6. Name and Address of Current F | | | | tegistered Agent | | | 7. Name and Address of New Registered Agent Name | | | | | |
| JOHN GERLAND,PADELFORD&KAKLIS ATT.,PA 1401 8TH AVE WEST BRADENTON, FL 34205 | | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| | | | | | | City | | | | FI | Zip Cod | e |
| 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature. Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | | | | | | | |
| Filing Fee is \$61.25 9. Election Campa Due by May 1, 2007 Trust Fund Con | | | | | | | | \$5.00 May Be Added to Fees | FI | | ck payable t | |
| 10. | - | OFFICERS AND D | IRECTORS | <u> </u> | 11. | | | ADDITIONS/CHAN | I. IGES TO OFFIC | ERS AND D | DIRECTORS IN | V 10 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | JOE I ST WEST TON, FL 34209 | | X Delete | | | 441/ | n. Sandy, 17th Ave. enton, FL | . W. | | ☐ Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | KEVIN T STREET WEST TO, FL 34221 | | X Delete | | | | elbach, Do 84th St. enton, FL | | | ☐ Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD NANCE, 1112 63R BRADEN | | | 太 Delete | | | 115 | t, Gary 69th enton, FL | 34209 | | ☐ Change | X) Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | ☐ Delete | | | | | | | ☐ Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | · | ☐ Delete | | | | | | | ☐ Change | ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | ☐ Delete | | | | | | | ☐ Change | Addition |
| indicated of the cor | l on this repo rporation or t | e information supplied wi rt or supplemental report he receiver or trustee em achment with an address | is true and powered to | d accurate and that it execute this report | my signa : as requ | iture shall l | nave the | same legal effect a | as if made unde | er oath: that | l am an office | r or director |