2003 NOT-FOR-PROFIT CORPORATION

Mailing Address

BRADENTON FL 34205

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

910 3RD AVE W

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 702002

1. Entity Name

Principal Place of Business

2. Principal Place of Business

910 3RD AVE W

BRADENTON FL 34205

Suite, Apt. #, etc.

WILCOX, DAVID W.

SUITE #401

SIGNATURE .

1301 6TH AVENUE WEST

the obligations of registered agent.

BRADENTON FL 34205

City & State

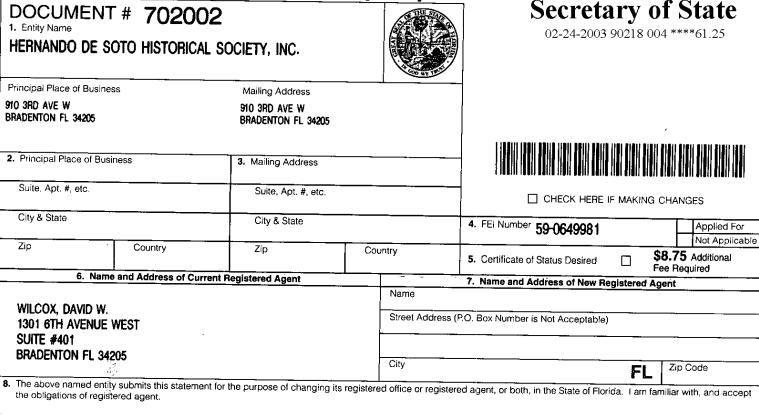
Zip

HERNANDO DE SOTO HISTORICAL SOCIETY, INC.

Country

6. Name and Address of Current Registered Agent

FILED Feb 24, 2003 8:00 am Secretary of State



	(NOTE: Registered Agent signature required when reinstating)				DATE		
FILE NOW: FEE IS \$61.25		Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State		
10.	OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VITA, JOHN 1008 80TH STREET NW BRADENTON FL 34209	□X Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STEVE GITT	W BLVD W	☐ Change	⊠ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD QUADERER, DAVID 4931 32ND AVE DRIVE WEST BRADENTON FL 34209	₩ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ROBERT COEY 2501 18TH AVE	W	☐ Change	X Addition
TITLE	en			LOVULDENTINIA - T.P.	34205		

■ Defete SD ☐ Change Addition GURLEY, MICHAEL NAME PATRICK HUSSEY STREET ADDRESS 206 73RD STREET NW STREET ADDRESS 5204 5TH AVE DR NW CITY-ST-ZIF **BRADENTON FL 34209** CITY-ST-ZIP BRADENTON, FL 34209 TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TE REQUIRED

Feb. 11, 2003