2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER DISCRECTOR

FILED Apr 04, 2006 8:00 am Secretary of State

04-04-2006 90046 050 ****61.25

904-396-583)

Daytime Phone #

DOCUMENT # 707389 1. Entity Name GENERAL DUNCAN LAMONT CLINCH HISTORICAL SOCIETY OF AMELIA ISLAND, INC.							04-04-2006	90046 ()30 *****6	1.25
Principal Place of Business 502 BROOME STREET P. 0. BOX 7 FERNANDINA BEACH, FL 32035 US Mailing Address 502 BROOME STREET P. 0. BOX 7 FERNANDINA BEACH, FL 32035					ss us		18 211 1888 1681 1842 184	1 1 1 1 1 1 1 1 1 		
Principal Place of Business 3.			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02112006	Chg-NP	CR2E03	37 (11/05)	
City & State			City & State			4. FEI Numbe 59-216				oplied For ot Applicable
Zip	Zip Country		Zip	Zip Cou		5. Certificate of Status Desired \$8.75 Additional Fee Required				
Name and Address of Current Registered Agent						7. Name and	Address of New R	egistered /	Agent	
WHITE R	OBERT M	1			Name					
WHITE, ROBERT M. 502 BROOME ST. FERNANDINA BCH, FL 32034					Street Addr	ress (P.O. Box Numbe	er is Not Acceptable	e)	-	
									-1 ····	
					City			FL	Zip Code	е
8. The above	named entiti ions of regis	ty submits this statement for	the purpose of changing i	ts register	ed office or re	gistered agent, or bot	h, in the State of Fk	orida. I am	familiar with,	and accept
ti le obligat	ions or regis	tered agent.								
SIGNATURE	Signature, typed	d or printed name of registered agent a	and title if applicable. (NO	OTE: Registere	d Agent signature r	equired when reinstating)		DATE		
Filing Fee is \$61.25 9. Election Ca Due by May 1, 2006 Trust Fund										
	_					\$5.00 May B Added to Fees	·		k payable to tment of St	
10.	_		Trust Fund		ion.	Added to Fees ADDITIONS/CH	·	ida Depar	tment of St	tate
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