FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra Br Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997 DOCUMENT #

(1)

CONQUISTADOR HISTORICAL FOUNDATION, INC.

FILED Jun 06 1997 8:00am Secretary of State



Principal Place of Business Mailing Address							180 1 18001 100 21 0 (1016 11001	E111 01011 01011 E		DIĞIL GİBIL IDEL	
910 9RD AVE BRADENTON F		910 3RD AVE W BRADENTON FL 34205-8625									
							3. Date Incorporated or Qualified 08/19/1968	3a. Date o	1 Last F /01/18	eport 996	
2. Principal P	Place of Business	2a. Mailing Address 26					4. FEI Number				
Suite, Apt.		Suite, Apt. #, etc.					5. Certificate of Status Desired	S8.75 Additional Fee Required			
City & State	e	City & State					Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24	Country 25	Zip 29	30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			. 199.032,		
	9. Name and Address of Current Registered Agent				10. Name and Address of New Register				nt		
				81	Name						
WILCO) 308 131		82 Street Add			Addres	s (P.O. Box Number is Not Acceptab	le)		-		
	NTON FL 34205		83								
	4			84	City			FL 8	5 Zip	Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS II 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12											
12.								Addition 2			
TITLE	TD Pic kering, Austin	L. DECEIE	1.1 TI				easurer -D	نا	Спанце	LI ADDITION	
NAME CYDEET ADODGED	904 21ST AVE W			1.2 NAME Au :		OO/	stin Pickering 4 21st Ave. W.			į į	
STREET ADDRESS CITY-ST-ZIP	PALMETTO FL				-	Pal	lmetto, FL 34221			١	
TITLE	PD	X DELETE	1.4 CH X DELETE 21 TH		1-2(1	Chairman - D		· •	Change	Addition	
NAME	SPRENGER, DR. TROMAS		2.2 NAM			William Theroux		n-			
STREET ADDRESS	8221 DE 8010 HWY NW				ADDRESS)3 Palm Aire Dr			}	
CITY-ST-ZIP	BRANDENTON FL		2. 4 CITY				asota FL 34243			1	
TITLE			_	Se Se		Sec	retary - 🛆		Change	☐ Addition	
NAME	RUSSELL, WILLIAM			3.2 NAME Wi		Wil	liam Russell				
STREET ADDRESS	3701 18TH AVE W			3.3 STREET ADDRESS 3.7		370	denton, AFE 3420	5			
CITY-ST-ZIP	BRADENTON FL			_	1 - ZIP	710	dencon, 1E 3420				
TITLE		DELETE	4.1 Ti					Ц	Change	☐ Addition	
NAME			4.2 N								
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CITY-ST-ZIP		DELETE		4.4 CITY - S		-			Change	Addition	
TITLE NAME		C prese		5.1 TITLE				ب	Change	□ Abdillon	
l I				5.2 NAME							
STREET ADORESS				5.3 STREET 5.4 CITY-S							
CITY-ST-ZIP TITLE				TLE				П	Change	Addition	
NAME			6.2 N/					سنه			
STREET ADDRESS	·				ADDRESS						
CITY-ST-ZIP			6.4 CITY - ST- ZIP								
	ov certify that the information supplied	with this filing does not quali				tated in	Section 119 07(3)(i). Florida Statute	s. I further cer	tify that	the	

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 12 or Block 13 if changed, or on an attachment with an address.