

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717676

FILED  
Mar 22, 2005  
Secretary of State

**Entity Name:** THE HERITAGE MUSEUM ASSOCIATION, INC.

**Current Principal Place of Business:**

115 WESTVIEW AVE.  
VALPARAISO, FL 32580

**New Principal Place of Business:**

**Current Mailing Address:**

115 WESTVIEW AVE.  
VALPARAISO, FL 32580 US

**New Mailing Address:**

**FEI Number:** 59-1637065

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BRINKMANN, MATHEW  
319 OKALOOSA AVE.  
VALPARAISO, FL 32580 US

**Name and Address of New Registered Agent:**

BRUNDAGE, BARBARA A  
115 WESTVIEW AVE.  
VALPARAISO, FL 32580 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: BARBARA A. BRUNDAGE

03/22/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: C ( ) Delete  
Name: MEIGS, JANE  
Address: 1315 BAYSHORE  
City-St-Zip: NICEVILLE, FL 32578

Title: VT ( ) Delete  
Name: MILLER, MARTHA  
Address: 13 MCKINLEY  
City-St-Zip: NICEVILLE, FL 32578

Title: S ( ) Delete  
Name: TONESS, OAIN  
Address: 1501 BAYSHORE  
City-St-Zip: NICEVILLE, FL 32578

Title: V ( ) Delete  
Name: WILLIAMS, RAE  
Address: P.O BOX 8  
City-St-Zip: VALPARAISO, FL 32580

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CHMN (X) Change ( ) Addition  
Name: MEIGS, JANE  
Address: 1315 BAYSHORE  
City-St-Zip: NICEVILLE, FL 32578

Title: TRS (X) Change ( ) Addition  
Name: HELMS, KAREN  
Address: 306 PALMETTO BLVD.  
City-St-Zip: NICEVILLE, FL 32578

Title: SEC (X) Change ( ) Addition  
Name: TONESS, ODIN  
Address: 1501 BAYSHORE DR.  
City-St-Zip: NICEVILLE, FL 32578

Title: VCHR (X) Change ( ) Addition  
Name: WILLIAMS, RAE  
Address: P.O BOX 8  
City-St-Zip: VALPARAISO, FL 32580

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: BARBARA A. BRUNDAGE

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03/22/2005

Electronic Signature of Signing Officer or Director

Date