

2006 NGT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 08:00 AM
Secretary of State

DOCUMENT # 718127	
1. Entity Name CENTRAL FLORIDA SOCIETY FOR HISTORICAL PRESERVATION, INC.	

Principal Place of Business 130 W. WARREN P O BOX 520500 LONGWOOD, FL 32752-7500	Mailing Address 130 W. WARREN P O BOX 520500 LONGWOOD, FL 32752-7500
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04102006 No Chg-NP	CR2E037 (11/05)
4. FEI Number 23-7160246	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**REDDITT, ROBERT T
835 MARAVAL CT
LONGWOOD, FL 32750**

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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 *Robert T. Redditt / Treasurer* **4/10/06** DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUNDY, H.G. 721 EAGLE AVE LONGWOOD, FL 32750
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP REDDITT, PAM 835 MARAVAL CT LONGWOOD, FL 32750
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RIDILLA, JOAN 71 N. TRIPLETT LAKE DR CASSELBERRY, FL 32707
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PUTZ, DAVID 280 W WARREN AVE LONGWOOD, FL 32750
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T REDDIT, TOM 835 MARAVAL CT LONGWOOD, FL 32750
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RICHARDSON, JOHN 1050 ALAMEDA DR LONGWOOD, FL 32750

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04/26/06-80105-021 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.