

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721041

FILED
Feb 04, 2005
Secretary of State

Entity Name: TAMPA HISTORICAL SOCIETY, INC.

Current Principal Place of Business:

245 S. HYDE PARK AVENUE
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

245 S. HYDE PARK AVENUE
TAMPA, FL 33606

New Mailing Address:

FEI Number: 59-1652496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNIGHT, WILLIAM
635 W. FRANKLIN ST., STE 725
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: SALCINES, JUDGE, HON. E.J.
Address: 801 E. TWIGGS ST., STE. 600
City-St-Zip: TAMPA, FL 336023547

Title: SD () Delete
Name: CARDINA, CLAIRE
Address: 10424 TROUVILLE DRIVE
City-St-Zip: TAMPA, FL 33624

Title: TD () Delete
Name: DUNHAM, ELIZABETH
Address: 1411 JULIE LAGOON
City-St-Zip: LUTZ, FL 33549

Title: P () Delete
Name: KNIGHT, WILLIAM
Address: 633 N. FRANKLIN ST., STE. 725
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: DUNHAM, ELIZABETH L
Address: 1411 JULIE LAGOON
City-St-Zip: LUTZ, FL 33549

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ELIZABETH L. DUNHAM

TREA

02/04/2005

Electronic Signature of Signing Officer or Director

Date