2004 NOT-FOR-PROFIT CORPORATION

Jul 23, 2004 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # 728553** 07-23-2004 90005 047 ****61.25 THE ARCHAEOLOGICAL SOCIETY OF SOUTHERN FLORIDA, INC. Principal Place of Business Mailing Address 2495 NW 35TH AVE 2495 NW 35TH AVE 44049504 MIAMI, FL 33142 MIAMI, FL 33142 %3.411/666666D& 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 07012004 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number 59-2349286 Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Conesa Brian Street Address (P.O. Box Number is Not Acceptable) 22425 SW 162 Avenue CONESA, BRIAN 14600 SW 87 COURT MIAMI, FL 33176 Zip Code 33170 Miami 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 . Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be Trust Fund Contribution. Due by September 8, 2004 Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE X Change Addition TANSEY, BARBARA NAME OP Address Tunsey, Burbara 2495 N.W. 35th Avenue NAME STREET ADDRESS 1021 S BISCAYNE RIVER DR STREET ADDRESS CITY-ST-ZIP MIAMI, FL CITY-ST-ZIP Miami, FL 33142 TD TITLE ☐ Delete TITLE ▼ Change noitibhA CONESA, BRIAN NAME NAME of Address Conesa, Brian STREET ADDRESS 14600 SW 87 COURT STREET ADDRESS 22425 SW 162 AVENUE MIGMI, PL. 33170 CITY-ST-ZIP MIAMI, FL, 33176 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition LEFKOW, SETH NAME NAME STREET ADDRESS 9700 W BAY HARBOR DR STREET ADDRESS BAY HARBOR ISL. FL. CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition CARR, ROBERT S. NAME NAME STREET ADDRESS 2932 MYRTLE OAK CIRCLE STREET ADDRESS CITY-ST-ZIP DAVIE, FL CITY-ST-ZIP Delete TITLE Change ☐ Addition SOUTH, JIM NAME NAME Read, Elizabeth STREET ADDRESS 9 DRURY DR... STREET ADDRESS 784 blenridge Road CITY-ST-ZIP KEY LARGO, FL 33037 CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 if changed, or on an attachment with an address with all other like empowered

SIGNATURE:

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July 18, 2004

786-243-1738

FILED