

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # 728553

1. Entity Name
THE ARCHAEOLOGICAL SOCIETY OF SOUTHERN
FLORIDA, INC.



Principal Place of Business
2495 NW 35TH AVE
MIAMI, FL 33142 US

Mailing Address
2495 NW 35TH AVE
MIAMI, FL 33142 US



04102006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2349286	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fees Required	

6. Name and Address of Current Registered Agent

CONESA, BRIAN
22425 SW 162 AVENUE
MIAMI, FL 33170

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	TANSEY, BARBARA
STREET ADDRESS	2495 NW 35TH AVENUE
CITY-ST-ZIP	MIAMI, FL 33142

TITLE	TD
NAME	CONESA, BRIAN
STREET ADDRESS	22425 SW 162 AVENUE
CITY-ST-ZIP	MIAMI, FL 33170

TITLE	D
NAME	LEFKOW, SETH
STREET ADDRESS	9700 W BAY HARBOR DR
CITY-ST-ZIP	BAY HARBOR ISL, FL

TITLE	D
NAME	CARR, ROBERT S.
STREET ADDRESS	2932 MYRTLE OAK CIRCLE
CITY-ST-ZIP	DAVIE, FL

TITLE	V
NAME	READ, ELIZABETH
STREET ADDRESS	784 GLENRIDGE RD
CITY-ST-ZIP	KEY BISCAYNE, FL 33149

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000508613
04/28/06-80010-018 61.25

**DO NOT WRITE
IN THIS SPACE**

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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Brian Conesa Brian Conesa / Treasurer April 11, 2006 305-245-9180