2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2011
Secretary of State

DOCUMENT# 728553

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

Current Principal Place of Business:

22425 S.W. 162 AVENUE
MIAMI, FL 33170 US

New Principal Place of Business:

Current Mailing Address:

22425 SW 162 AVENUE
MIAMI, FL 33170 US

New Mailing Address:

22425 S.W. 162 AVENUE
MIAMI, FL 33170 US

FEI Number: 59-2349286 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CONESA, BRIAN
22425 SW 162 AVENUE
MIAMI, FL 33170 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: PD
Name: HAIDUVEN, RICHARD
Address: 11725 SW 81 ROAD
City-St-Zip: MIAMI, FL 33156

Title: TD
Name: CONESA, BRIAN
Address: 22425 SW 162 AVENUE
City-St-Zip: MIAMI, FL 33170

Title: D
Name: LEFKOW, SETH
Address: 9700 W BAY HARBOR DR
City-St-Zip: BAY HARBOR ISL, FL

Title: D
Name: CARR, ROBERT S.
Address: 2932 MYRTLE OAK CIRCLE
City-St-Zip: DAVIE, FL

Title: D
Name: JACOBSON, LISA
Address: 401 SW 8TH AVENUNE
City-St-Zip: FLORIDA CITY, FL 33034

Title: VD
Name: TANSEY, BARBARA
Address: 35601 S.W. 192 AVENUE
City-St-Zip: HOMESTEAD, FL 33034

I hereby 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 all other like empowered.

SIGNATURE: BRIAN CONESA TD 02/06/2011

Electronic Signature of Signing Officer or Director Date