2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#728684

FILED Jan 07, 2004 Secretary of State

Entity Name: GULF WIND CHAPTER NATIONAL RAILWAY HISTORICAL SOCIETY, INC.

Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
PO BOX 3 TALLAHA	3490 SSEE, FL 323	15 US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
2306 LIME TALLAHA	ERICK DR. SSEE, FL 323	809 US			
FEI Number	: 59-2949008	FEI Number Applied For () FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Age	nt: Name and Address	of New Registered Agent:	
806 MIDDI	DER,EDWIN M LEBROOKS C SSEE, FL 323	IRCLE			
	e named entity e of Florida.	submits this statement fo	r the purpose of changing its register	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registere	ed Agent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DV (KOENIG, WILL 3840 CASTLEI TALLAHASSEE	BERRY DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (SAYES, ROBE 1560 CRISTOE TALLAHASSEE	BAL DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD (WINTERS, RIC 2053 WHITE A TALLAHASSEE	SH WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD (BOYLE, WILLI 2306 LIMERIC TALLAHASSEE	K DR.	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	D (FERRO, DAVE 1205 OLD FOR TALLAHASSEE	RT DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (SANFORD, LO 4117 ALPINE \ TALLAHASSEE	WAY	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: WILLIAM E. BOYLE, JR. STD 01/07/2004