

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728684

FILED  
Feb 04, 2005  
Secretary of State

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

**Current Principal Place of Business:**

PO BOX 3490  
TALLAHASSEE, FL 32315 US

**New Principal Place of Business:**

**Current Mailing Address:**

2306 LIMERICK DR.  
TALLAHASSEE, FL 32309 US

**New Mailing Address:**

**FEI Number:** 59-2949008

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHROEDER, EDWIN M.  
806 MIDDLEBROOKS CIRCLE  
TALLAHASSEE, FL 32312 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: DV ( ) Delete  
Name: KOENIG, WILLIAM J  
Address: 3840 CASTLEBERRY DR  
City-St-Zip: TALLAHASSEE, FL 32303

Title: D ( ) Delete  
Name: SAYES, ROBERT S.,  
Address: 1560 CRISTOBAL DR.  
City-St-Zip: TALLAHASSEE, FL 32304

Title: PD ( ) Delete  
Name: WINTERS, RICHARD  
Address: 2053 WHITE ASH WAY  
City-St-Zip: TALLAHASSEE, FL 32308

Title: STD ( ) Delete  
Name: BOYLE, WILLIAM E., J, R.  
Address: 2306 LIMERICK DR.  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete  
Name: FERRO, DAVE  
Address: 1205 OLD FORT DRIVE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: D ( ) Delete  
Name: SANFORD, LOVINGOOD  
Address: 4117 ALPINE WAY  
City-St-Zip: TALLAHASSEE, FL 32312

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: WILLIAM E. BOYLE, JR.

STD

02/04/2005

Electronic Signature of Signing Officer or Director

Date