

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730718

FILED
Apr 30, 2004
Secretary of State**Entity Name:** POLK COUNTY HISTORICAL ASSOCIATION, INC.**Current Principal Place of Business:**POST OFFICE BOX 2749
BARTOW, FL 33830**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 2749
BARTOW, FL 338312749**New Mailing Address:****FEI Number:** 23-7450875**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WILSON, DONALD H JR
150 EAST DAVIDSON STREET
BARTOW, FL 33830 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: D () Delete
Name: WRIGHT, FREDDIE
Address: 1215 SOUTH ORANGE AVENUE
City-St-Zip: BARTOW, FL 33830

Title: VPD () Delete
Name: ALBRITTON, RAY
Address: 4830 BETHLEHEM ROAD
City-St-Zip: MULBERRY, FL 33860

Title: D () Delete
Name: BOWMAN, HAZEL
Address: 511 NE 9TH AVE
City-St-Zip: MULBERRY, FL 338602620

Title: SD () Delete
Name: SELLERS, SUE
Address: 6931 NEWMAN CIR E
City-St-Zip: LAKE LAND, FL 338132566

Title: D () Delete
Name: BURR, PEGGY
Address: 511 E. MCCRORIE ST.
City-St-Zip: LAKE LAND, FL 338033400

Title: D () Delete
Name: COPELAND, DOY
Address: 13-B MOORE RD.
City-St-Zip: HAINES CITY, FL 33844

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ETHEREDGE, EDWARD
Address: 1850 MARIPOSA AVENUE
City-St-Zip: BARTOW, FL 33830

Title: VPD (X) Change () Addition
Name: DENHAM, JAMES M
Address: 729 WOODHILL DRIVE
City-St-Zip: LAKE LAND, FL 33813

Title: TD (X) Change () Addition
Name: THORNHILL, PAUL
Address: 2435 PETERSON ROAD
City-St-Zip: LAKE LAND, FL 338133222

Title: SD (X) Change () Addition
Name: JARRETT, KATHRYN
Address: 1536 HOLLY ROAD
City-St-Zip: LAKE LAND, FL 33801

Title: D (X) Change () Addition
Name: BURR, PEGGY
Address: 806 W. PATTERON STREET
City-St-Zip: LAKE LAND, FL 338031450

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: KATHRYN JARRETT

SD

04/30/2004

Electronic Signature of Signing Officer or Director

Date