2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732469

FILED Jun 22, 2005 Secretary of State

Entity Name: MUSEUM OF SOUTHERN HISTORY, INC.

Current Principal Place of Business: New Principal Place of Business:

4304 HERSCHEL ST

JACKSONVILLE, FL 32210 US

Current Mailing Address: New Mailing Address:

4304 HERSCHEL T

JACKSONVILLE, FL 32210 US

FEI Number: 59-1662145 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

FURNS, R. GARY 1566 SANDY SPRINGS DR. JACKSONVILLE, FL 32003 US

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition HARDEE, LUCIUS A BRUNDICK, TESCH Name: Name: 4227 BEVERLY AVE. Address: 4804 ARAPAHOE AVENUE Address: City-St-Zip: JACKSONVILLE, FL 32210 City-St-Zip: JACKSONVILLE, FL 32210 US

Title: PD () Delete Title: (X) Change () Addition EVANS, R. GARY Name: KERLIN, RANDY Name:

Address: 1566 SANDY SPRINGS DR. Address: 741 PARK AVE. #133 City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip: ORANGE PARK, FL 32073

Title: () Delete Title: SD (X) Change () Addition BOND, JOHN R O'NEAL, VAN R Name: Name:

7407 HENNESSY RD Address: Address: 17500 MONTESSA TERRACE

City-St-Zip: JACKSONVILLE, FL City-St-Zip: JACKSONVILLE, FL 32226 US

Title: CD () Delete Title: CD (X) Change () Addition Name: SEAGRAVES, VAN Name: SEAGRAVES, VAN

Address: 3618 WALSH ST. Address: 3618 WALSH ST.

City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32205 US

Title: () Delete Title: () Change (X) Addition Name:

HARDEE, LUCIOUS A Name: 4227 BEVERLY AVENUE Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32210 US

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: VAN C. SEAGRAVES CD 06/22/2005