

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732469

FILED  
Feb 14, 2006  
Secretary of State

**Entity Name:** MUSEUM OF SOUTHERN HISTORY, INC.

**Current Principal Place of Business:**

4304 HERSCHEL ST  
JACKSONVILLE, FL 32210 US

**New Principal Place of Business:**

**Current Mailing Address:**

4304 HERSCHEL T  
JACKSONVILLE, FL 32210 US

**New Mailing Address:**

**FEI Number:** 59-1662145

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FURNS, R. GARY  
1566 SANDY SPRINGS DR.  
JACKSONVILLE, FL 32003 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: VD ( ) Delete  
Name: BRUNDICK, TESCH  
Address: 4804 ARAPAHOE AVENUE  
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: PD ( ) Delete  
Name: KERLIN, RANDY  
Address: 741 PARK AVE. #133  
City-St-Zip: ORANGE PARK, FL 32073

Title: SD ( ) Delete  
Name: O'NEAL, VAN R  
Address: 17500 MONTESSA TERRACE  
City-St-Zip: JACKSONVILLE, FL 32226 US

Title: CD ( ) Delete  
Name: SEAGRAVES, VAN  
Address: 3618 WALSH ST.  
City-St-Zip: JACKSONVILLE, FL 32205 US

Title: CD ( ) Delete  
Name: HARDEE, LUCIOUS A  
Address: 4227 BEVERLY AVENUE  
City-St-Zip: JACKSONVILLE, FL 32210 US

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

Title: VD (X) Change ( ) Addition  
Name: TERRY, GORDON  
Address: 4505 BASS PLACE SOUTH  
City-St-Zip: JACKSONVILLE, FL 32210 US

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

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

Title: CD (X) Change ( ) Addition  
Name: SEAGRAVES, VAN C  
Address: 3618 WALSH ST.  
City-St-Zip: JACKSONVILLE, FL 32205 US

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 Chapter 119, 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

02/14/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date