

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735873

FILED
Jul 14, 2006
Secretary of State

Entity Name: ORMOND BEACH HISTORICAL TRUST, INC.

Current Principal Place of Business:

38 E GRANADA BLVD
ORMOND BEACH, FL 32176 US

New Principal Place of Business:

Current Mailing Address:

38 E GRANADA BLVD
ORMOND BEACH, FL 32176 US

New Mailing Address:

FEI Number: 51-0199398 **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:

LEVERONI, MARY-LU
38 E GRANADA BLVD
ORMOND BEACH, FL 32176 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: SD () Delete
Name: SCHERMER, SUE
Address: 1 JOHN ANDERSON DR, #620
City-St-Zip: ORMOND BEACH, FL 32176

Title: PD () Delete
Name: LOHMAN, NANCY MRS.
Address: 733 W GRANADA BLVD
City-St-Zip: ORMOND BEACH, FL 32174

Title: TD () Delete
Name: LEVERONI, MARY-LU
Address: 1400 OCEAN SHORE BLVD
City-St-Zip: ORMOND BEACH, FL 32176

Title: VP () Delete
Name: SMITH, DAN
Address: 9 SUNSET BLVD.
City-St-Zip: ORMOND BEACH, FL 32176

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: SHAPIRO, PHILIP
Address: 38 E GRANADA BLVD
City-St-Zip: ORMOND BEACH, FL 32176

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

Title: TD (X) Change () Addition
Name: LEVERONI, MARY-LU
Address: 38 E GRANADA BLVD
City-St-Zip: ORMOND BEACH, FL 32176

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

Title: VP () Change (X) Addition
Name: GARRISON, BONDA
Address: 38 E GRANADA BLVD
City-St-Zip: ORMOND BEACH, FL 32176

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: MARY-LU LEVERONI

TD

07/14/2006

Electronic Signature of Signing Officer or Director

Date