2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#739635

FILED Jan 13, 2009 Secretary of State

Entity Name: THE HISTORICAL SOCIETY OF SARASOTA COUNTY, INC.

Current Pr	incipal Place	of Business:	New Prin	New Principal Place of Business:		
3100 WOO SARASOTA	D ST. A, FL 34237					
Current Ma	ailing Addres	s:	New Mail	New Mailing Address:		
P O BOX 1 SARASOTA	632 A, FL 34230					
FEI Number:	59-6169574	FEI Number Applied For ()	FEI Number Not App	olicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
3100 WOO	GEORGE "PET DD ST A, FL 34237	E" I US	3100 WO	GEORGE I OD ST TA, FL 34237	US	
The above in the State		ubmits this statement for the pu	rpose of changing	its registered o	ffice or registered agent, or both,	
SIGNATUR	RE: GEORGE				01/13/2009	
	Electroni	ic Signature of Registered Ager	nt		Date	
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () BERNS, ARNOL 4613 S TAMIAM SARASOTA, FL	I TRAIL	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	VP () BLUE, SUZETTE 2929 BAHIA VIS SARASOTA, FL	TA ST	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	T () ESTHUS, GEOR 3100 WOOD ST SARASOTA, FL		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () JOYCE, SHARO 2250 GULF GAT SARASOTA, FL	E DR #A	Title: Name: Address: City-St-Zip:	MERMIN, VIRGI 5049 HIGEL AV	E.	
Title: Name: Address: City-St-Zip:	D () BOYCE, BETH 6945 MYSTIC LI SARASOTA, FL		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	D () HICKMAN, BREI 2110 LUSITANIA SARASOTA, FL	ADR.	Title: Name: Address: City-St-Zip:	()	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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: GEORGE I. ESTHUS T 01/13/2009