

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 745182

**FILED**  
**Jan 19, 2012**  
**Secretary of State**

**Entity Name:** BAKER COUNTY HISTORICAL SOCIETY, INC.

**Current Principal Place of Business:**

42 W. MCIVER AVE  
MACCLENNEY, FL 32063 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 856  
MACCLENNEY, FL 32063 US

**New Mailing Address:**

**FEI Number:** 59-2174630      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

WHELAN, TIMOTHY D  
7885 WINDER ROAD  
MACCLENNEY, FL 32063 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: P  
Name: BEASLEY, SHELDON  
Address: 6130 SOUTH COUNTY ROAD 125  
City-St-Zip: MACCLENNEY, FL 32063 US

Title: VP  
Name: RICHARDSON, DAVID  
Address: 9528 MANSION ROAD  
City-St-Zip: GLEN ST MARY, FL 32040 US

Title: S  
Name: THOMAS, KAREN E  
Address: 7785 WINDER ROAD  
City-St-Zip: MACCLENNEY, FL 32063 US

Title: T  
Name: WHELAN, TIMOTHY D  
Address: 7785 WINDER ROAD  
City-St-Zip: MACCLENNEY, FL 32063 US

Title: D  
Name: WATERS, JOAN  
Address: 7097 MILTONDALE ROAD  
City-St-Zip: MACCLENNEY, FL 32063 US

Title: D  
Name: RHODEN, ANGELA  
Address: 11594 HOLL RHODEN ROAD  
City-St-Zip: GLEN ST. MAY, FL 32040 US

I hereby 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 all other like empowered.

SIGNATURE: TIMOTHY WHELAN

T

01/19/2012

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

\_\_\_\_\_  
Date