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May 27 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT

1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 748129

1. Corporation Name
CENTRAL FLORIDA HISTORICAL RAILROAD MODELERS, INC

Principal Place of Business	Mailing Address
2090 N. FORSYTHE ROAD STE. 211 ORLANDO, FLORIDA	P.O. BOX 621793 ORLANDO FL, 32862-1793

2. Principal Place of Business	2a. Mailing Address
21 2090 N. FORSYTHE RD	26 P.O. BOX 621793
Suite, Apt. #, etc 22 SUITE 211	Suite, Apt. #, etc 27
City & State 23 ORLANDO FL	City & State 28 ORLANDO FL
Zip / Country 24 / 25 USA	Zip / Country 29 32862-1793 / 30 USA

3. Date Incorporated or Qualified	3a. Date of Last Report
1979	1996

4. FEI Number: 59-2246286 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

Patrick T. Berry
11919 Allamanda Court
Orlando FL 32837-6715

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes

SIGNATURE: Patrick T. Berry PATRICK T. Berry, Secretary/Director/Registered Agent 5-20-97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President/Director JIM BLY 6422 STOCKBRIDGE AVE. ORLANDO, FL 32809	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice-President/Director MERRILL D. CRISSEY, SR. 202 DUBSTREAD CIRCLE ORLANDO FL 32804	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	Vice-President/Director merrill D. Crissey, SR. 202 Dubstread Circle ORLANDO, FL 32804	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer/Director RUSS W. LIVINGSTON 5506 R.D. AVENUE ORLANDO, FL 32809	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary/Director PATRICK T. BERRY 11919 ALLAMANDA Court ORLANDO FL 32837-6715	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	200002202772 -06/05/97--01050--025 ***61.25 PE 5.27	☐ Change ☐ Addition

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Patrick T. Berry PATRICK T. BERRY, Secretary/Director (407) 857-1430
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #