2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 06, 2003 8:00 am
Secretary of State
02-06-2003 90052 001 ****61.25

DOCUMENT # 754443

1. Entity Name
INDIAN ROCKS BEACH HISTORICAL SOCIETY AND MUSEUM , INC.

90018836

Principal Place of Business	Mailing Address
304 15TH AVE INDIAN ROCKS BEACH FL 33785 US	1507 BAY PALM BLVD INDIAN ROCKS BEACH FL 33785 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2052742 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ROBINSON, JOHN 31 LA HACIENDA DR INDIAN ROCKS BEACH FL 33785	Name: Ockunzzi, Jan Street Address (P.O. Box Number is Not Acceptable): 2707 First St. #1 City: Indian Rocks Beach FL Zip Code: 33785

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Jan Ockunzzi, 1/28/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ROBINSON, JOHN 311 LA HACIENDA DR INDIAN ROCKS BEACH FL 33785	☐ Delete	P Ockunzzi, Jan #1 2707 First St. Indian Rocks Beach, FL 33785	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WESTFALL, LYDA 13531-90TH TERRACE NORTH SEMINOLE FL 33776	☐ Delete	V Ayers, Wayne 2900 Gulf Blvd. #304 Belleair Beach, FL 33786	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KOSTOFF, HELEN 14130 ROSEMARY LANE #5101 LARGO FL 33774	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TR HARWOOD, JACKIE PO BOX 186 INDIAN ROCKS BEACH FL 33785	☐ Delete	T Muneio, Patricia 309 Bahia Vista Dr Indian Rocks Beach, FL 33785	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PALAMARA, KARIN 102-15TH AVE INDIAN ROCKS BEACH FL 33785	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARCIA, KAYE 131 BLUFF VIEW DR. #208 BELLEAIR BLUFFS FL 33770	☑ Delete	D Westfall, Lyda 13531-90th Terrace North Seminole, FL 33776	☑ Change ☐ Addition

CR2E037 (10/02)

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jan Ockunzzi SIGNATURE REQUIRED Jan Ockunzzi 1/28/03 727-595-7006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #