

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755896

FILED
Mar 02, 2009
Secretary of State

Entity Name: FLORIDA ARCHAEOLOGICAL COUNCIL, INC.

Current Principal Place of Business:

4104 ST. AUGUSTINE ROAD
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

4104 ST. AUGUSTINE ROAD
JACKSONVILLE, FL 32207 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAND, MYLES C
4104 ST. AUGUSTINE ROAD
JACKSONVILLE, FL 32207 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: VP () Delete
Name: BENCHLEY, ELIZABETH
Address: UWF 11000 UNIVERSITY PARKWAY
City-St-Zip: PENSACOLA, FL 32514

Title: PRES () Delete
Name: JONES, PAUL
Address: 12157 W. LINEBAUGH AVENUE, NO. 167
City-St-Zip: TAMPA, FL 33626

Title: S () Delete
Name: GOUGEON, RAMIE
Address: 5910 BENJAMIN CENTER DR., SUITE 120
City-St-Zip: TAMPA, FL 33634

Title: T () Delete
Name: BLAND, MYLES C
Address: 4104 ST. AUGUSTINE ROAD
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: LECOMPTE, ELISE
Address: MUSEUM ROAD
City-St-Zip: GAINESVILLE, FL 32611

Title: D () Delete
Name: HANDLEY, BRENT
Address: 7220 FINANCIAL WAY #100
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: T (X) Change () Addition
Name: BLAND, MYLES C
Address: 4104 ST. AUGUSTINE ROAD
City-St-Zip: JACKSONVILLE, FL 32207

Title: D (X) Change () Addition
Name: LECOMPTE, ELISE
Address: 1601 MUSEUM ROAD
City-St-Zip: GAINESVILLE, FL 32611

Title: D (X) Change () Addition
Name: HANDLEY, BRENT
Address: 7220 FINANCIAL WAY, SUITE 100
City-St-Zip: JACKSONVILLE, FL 32256

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: MYLES BLAND

T

03/02/2009

Electronic Signature of Signing Officer or Director

Date