2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#755896

FILED Apr 01, 2012 Secretary of State

Entity Name: FLORIDA ARCHAEOLOGICAL COUNCIL, INC.

Current Principal Place of Business: New Principal Place of Business:

FLORIDA HISTORY LLC

3905 CRESCENT PARK DRIVE
12157 W. LINEBALIGH AVENUE NO. 167

RIVERVIEW EL. 33578

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12157 W. LINEBAUGH AVENUE, NO. 167 RIVERVIEW, FL 33578 L TAMPA, FL 33626 US

Current Mailing Address: New Mailing Address:

FLORIDA HISTORY LLC
12157 W. LINEBAUGH AVENUE, NO. 167
3905 CRESCENT PARK DRIVE
RIVERVIEW, FL 33578 US

12157 W. LINEBAUGH AVENUE, NO. 167 RIVERVIEW, FL 33578 US TAMPA, FL 33626 US

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

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

PAUL, JONES PAUL, JONES

12157 W. LINEBAUGH AVENUE, NO. 167

TAMPA, FL 33626 US

3905 CRESCENT PARK DRIVE RIVERVIEW, FL 33578 US

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: PAUL JONES 04/01/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VP

Name: BENCHLEY, ELIZABETH

Address: UWF 11000 UNIVERSITY PARKWAY

City-St-Zip: PENSACOLA, FL 32514

Title: PRES Name: JONES, PAUL

Address: 3905 CRESCENT PARK DRIVE City-St-Zip: RIVERVIEW, FL 33578

Title: S

Name: GOUGEON, RAMIE

Address: UWF - BLDG. 13, 11000 UNIVERSITY PKWY.

City-St-Zip: PENSA COLA, FL 32514

Title: MS

 Name:
 RUHL, DONNA

 Address:
 1601 MUSEUM ROAD

 City-St-Zip:
 GAINESVILLE, FL 32611

Title: D

Name: LECOMPTE, ELISE
Address: 1601 MUSEUM ROAD
City-St-Zip: GAINESVILLE, FL 32611

Title: D

Name: HANDLEY, BRENT

Address: 7220 FINANCIAL WAY, SUITE 100 City-St-Zip: JACKSONVILLE, FL 32256

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: MYLES BLAND TRES 04/01/2012