


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

07 JUN 15 AM 8:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 758915 1. Entity Name THE HISTORICAL SOCIETY OF AVON PARK, INC.	
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Principal Place of Business 3 N MUSEUM AV AVON PARK, FL 33825	Mailing Address 3 N MUSEUM AV AVON PARK, FL 33825
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04302007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2302474	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SHIREY, C.B.
94 E. RAYMOND ST.
AVON PARK, FL 33825**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

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

700102356497
06/14/07--01074--001 ***3972.50

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS FLOWERS, ROBERTA 61 E. WOLF ST AVON PARK, FL 33825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP JORDAN, JEAN 600 LAKE VERONA BLVD AVON PARK, FL 33825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP JORDON, BETTY 1708 LAKE PIONEER DRIVE AVON PARK, FL 33825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LEVEY, LARRY 2655 S NICKLAUS DR AVON PARK, FL 33825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT BENNETT, RENEE PO BOX 7082 AVON PARK, FL 33825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, JULIA 507 US HWY 27 NORTH AVON PARK, FL 33825

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Renee Bennett* **6-1-07** **863452 0101**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

706/18