

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 16, 2008 8:00 am
Secretary of State

05-16-2008 90027 038 ****66.25

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1. Entity Name

ALTAMONTE SPRINGS HISTORICAL SOCIETY, INC..



Principal Place of Business

ALTAMONTE SPRINGS LIBRARY
281 N MAITLAND AVENUE
ALTAMONTE SPRINGS FL 32701
US

Mailing Address

380 LAKE SEMINARY CIR
MAITLAND FL 32751
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2160098

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/07)

6. Name and Address of Current Registered Agent

REGISTER, OPAL
380 LAKE SEMINARY CIR
MAITLAND FL 32751

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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
Due By May 1, 2008

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

TITLE D ☐ Delete
NAME MYERS, ALICE
STREET ADDRESS 3365 EVERGREEN ROAD
CITY-ST-ZIP ZELLWOOD FL

TITLE VPD ☐ Delete
NAME SMITH, DOROTHY
STREET ADDRESS 244 ALTAMONTE BAY CLUB ORANGE AVE
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32751

TITLE P ☐ Delete
NAME REGISTER, OPAL
STREET ADDRESS 380 LAKE SEMINARY CIR
CITY-ST-ZIP MAITLAND FL

TITLE TD ☐ Delete
NAME LASTER, DOROTHY
STREET ADDRESS 125 E ORANGE
CITY-ST-ZIP ALTAMONTE SPRINGS FL

TITLE SD ☐ Delete
NAME BROCK, MARION
STREET ADDRESS 222 ADELAIDE BLVD
CITY-ST-ZIP ALTAMONTE SPRINGS FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME VPD, DAN I
STREET ADDRESS 937 VINE RIDGE DRIVE #107
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714

TITLE ☒ Change ☐ Addition
NAME BIERMAN, CARMEN
STREET ADDRESS 724 LAKE AVE
CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32701

TITLE ☒ Change ☐ Addition
NAME TD REGISTER, OPAL
STREET ADDRESS 380 LAKE SEMINARY CIRCLE
CITY-ST-ZIP MAITLAND, FL 32751

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Opal Register OPAL REGISTER

APRIL 27, 2008

407-339-2337