

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 24, 2005 8:00 am
Secretary of State

05-24-2005 90121 049 ****61.25

DOCUMENT # 768212		
1. Entity Name EUSTIS HISTORICAL MUSEUM & PRESERVATION SOCIETY, INC.		
Principal Place of Business 536 N. BAY STREET EUSTIS FL 32726-3439		Mailing Address 536 N. BAY STREET EUSTIS FL 32726-3439
2. Principal Place of Business 536 N. Bay Street Suite, Apt. #, etc.	3. Mailing Address 536 N. Bay Street Suite, Apt. #, etc.	
City & State EUSTIS, FL.	City & State EUSTIS, FL	
Zip 32726	Country lake	Zip 32726
		Country lake



1st MOORE CR2E037 (10/04)

4. FEI Number 59-2351008		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent MCKINSTRY DAVIS, ALICE 536 N BAY ST EUSTIS FL 32726		
7. Name and Address of New Registered Agent Name BRENDA HERBST Street Address (P.O. Box Number is Not Acceptable) 1402 ST. ANDREWS BLVD. EUSTIS City FL Zip Code 32726		

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, 2005**

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	IVP RYAN, ETHEL 506 GOTTSCHKE AVE EUSTIS FL ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	IVP Gillies, Jim 1223 Tyngham Rd. EUSTIS, Florida 32726 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TRASK, ARET E 15800 DORA AVE EUSTIS FL ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RYAN, BOB 506 GOTTSCHKE AVE EUSTIS FL ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P McClellan, BETTY 902 Summit EUSTIS, FL 32726 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCGUIRE, JEAN 409 S CENTER ST EUSTIS FL 32726 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Hartfield, Mary 37430 Oak Lane Donavista, FL 32784 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHMIDT, JUNE 1390 LAKEVIEW AVE EUSTIS FL ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RYAN, Robert D 1107 Spruce CT Tavares, FL 32778 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DENLINGER, BOBBIE 100 FROST WAY EUSTIS FL 32726 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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:



ROBERT D. RYAN 5-11-05 352-483-0046

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #