

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # 768212

1. Entity Name
EUSTIS HISTORICAL MUSEUM & PRESERVATION
SOCIETY, INC.



Principal Place of Business
536 N. BAY STREET
EUSTIS, FL 32726

Mailing Address
536 N. BAY STREET
EUSTIS, FL 32726

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

11182008 REIN-NP CR2E099 (1/07)

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

7. Name and Address of New Registered Agent

HERBST, BRENDA
1402 ST ANDREWS BLVD
EUSTIS, FL 32726

Name
WENDY J. HOUDER-ERSKINE

Street Address (P.O. Box Number is Not Acceptable)
3810 DAYSHORE CIRCLE

City
TAVARES

FL Zip Code
32778

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

Wendy Houlder-Erskine

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

11-21-08

DATE

FILE NOW!!! FEE IS \$61.25
After January 1, 2009, Fee will be \$122.50

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE ☒ D ☐ Delete
NAME GILLIES, JIM
STREET ADDRESS 1233 TYRIGAM ROAD
CITY-ST-ZIP EUSTIS, FL 32726

TITLE ☒ D ☐ Delete
NAME TRASK, ARET E
STREET ADDRESS 15800 DORA AVE
CITY-ST-ZIP EUSTIS, FL

TITLE ☐ P ☐ Delete
NAME MCCLELLAN, BETTY
STREET ADDRESS 702 ZIMMIT SUMMIT
CITY-ST-ZIP EUSTIS, FL 32726

TITLE ☐ T ☐ Delete
NAME BLANKENSHIP, JOHN MR
STREET ADDRESS 1748 LAKE TERRACE DR
CITY-ST-ZIP EUSTIS, FL 32726

TITLE ☐ D ☐ Delete
NAME RYAN, ROBERT D
STREET ADDRESS 1107 SPRUCE COURT
CITY-ST-ZIP TAVARES, FL 32778

TITLE ☐ D ☐ Delete
NAME DENLINGER, BOBBIE
STREET ADDRESS 100 FROST WAY
CITY-ST-ZIP EUSTIS, FL 32726

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE ☐ D ☐ Change ☒ Addition
NAME LOUISE CARTER
STREET ADDRESS P.O. BOX 350522
CITY-ST-ZIP GRAND ISLAND, FL 32735

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

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

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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 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

John Blankenship

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN I. BLANKENSHIP

Date

11/20/08

Daytime Phone #

TREASURER

352

483-0046

REINSTATEMENT 2008 KS

10/08/08 01025 004
\$61.25

LOUISE CARTER
P.O. BOX 350522
GRAND ISLAND, FL 32735

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