2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2006 8:00 am
Secretary of State
01-26-2006 90041 009 ****61.25

DOCUMENT # 770902

1. Entity Name
FLAGLER COUNTY HISTORICAL SOCIETY, INC.

Principal Place of Business
204 EAST MOODY BLVD
BUNNELL, FL 32110

Mailing Address
P.O. BOX 87
BUNNELL, FL 32110

01112006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

4. FEI Number 59-2279762 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
DEEN, CLAUDE S JR.
1347 N. OCEANSHORE BLVD.
FLAGLER BEACH, FL 32136

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] 17 JAN 2006
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

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	P	☐ Delete	TITLE	P	☐ Change ☑ Addition
NAME	MARQUIS, DIANE		NAME	HADEED, AL	
STREET ADDRESS	3 GALLBERRY COURT		STREET ADDRESS	104 S 4TH STREET/PO BOX 190	
CITY-ST-ZIP	BUNNELL, FL 32110		CITY-ST-ZIP	FLAGLER BEACH, FL 32136	
TITLE	V	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	FELL, PAUL R		NAME		
STREET ADDRESS	400 E MOODY BLVD		STREET ADDRESS		
CITY-ST-ZIP	BUNNELL, FL 32110		CITY-ST-ZIP		
TITLE	S	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	DEEN, GLORIA M		NAME		
STREET ADDRESS	1347 N OCEANSHORE BLVD		STREET ADDRESS		
CITY-ST-ZIP	FLAGLER BEACH, FL 32136		CITY-ST-ZIP		
TITLE	T	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	DEEN, CLAUDE S JR.		NAME		
STREET ADDRESS	1347 N. OCEANSHORE BLVD.		STREET ADDRESS		
CITY-ST-ZIP	FLAGLER BEACH, FL 32136		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	CLARK, MARY ANN		NAME		
STREET ADDRESS	1923 S FLAGLER AVE		STREET ADDRESS		
CITY-ST-ZIP	FLAGLER BEACH, FL 32136		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	SPONENBURG, LINDA		NAME		
STREET ADDRESS	1209 COUNTY ROAD 140		STREET ADDRESS		
CITY-ST-ZIP	BUNNELL, FL 32110		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: [signature] Al Hadeed, President 17 January 2006 386-439-7878
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #