

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 15, 2007 8:00 am**  
**Secretary of State**

02-15-2007 90036 020 \*\*\*150.00

**DOCUMENT # L38633**

1. Entity Name  
**ACACIA HISTORICAL ARTS INTERNATIONAL, INC.**



40017551

Principal Place of Business  
**2358 S. OCEAN BLVD.  
HIGHLAND BCH, FL 33487 US**

Mailing Address  
**% LINDA K. JOHNSON CPA.  
600 W HILLSBORO BLVD SUITE 510  
DEERFIELD BEACH, FL 33441**

2. Principal Place of Business - No P.O. Box #  
Suite, Apt. #, etc.

3. Mailing Address  
**350 JIM MORAN BLVD  
STE 220**

City & State  
**DEERFIELD BEACH FL**

Zip Country  
**33442 U.S.A**

01232007 Chg-P CR2E034 (12/06)

4. FEI Number  
**65-0167373**

Applied For  
☐ Not Applicable

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

**6. Name and Address of Current Registered Agent**

**JOHNSON, LINDA  
350 JIM MORAN BLVD  
SUITE 220  
DEERFIELD BEACH, FL 33442**

**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 \$150.00  
After May 1, 2007 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREENE, CARROLL 532 E STATE ST SAVANNAH, GA 31401	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D INCE, PETER C. 1216 SW MULBERRY WAY BOCA RATON, FL 33486	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CDV HERTEL, GEORGE S 1515 RUNNING CEDAR CT CHARLOTTESVILLE, VA 22911	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'ROURKE, MICHAEL 600 S OCEAN BLVD #705 BOCA RATON, FL 33432	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MC ALLISTER, JANE 7670 SE SHENANDOAH DR HOBE SOUND, FL 33455	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERTEL, MARILYN 1515 RUNNING CEDAR CT CHARLOTTESVILLE, VA 22911	<input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 607, 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:**

*George S. Hertel*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**GEORGE S HERTEL** 2/1/07 434-293-1281  
Date Daytime Phone #

# ATTACHMENT

40017557

ADDITIONS TO LIST OF OFFICERS AND DIRECTORS  
ACACIA HISTORICAL ARTS INTERNATIONAL, INC.  
DOCUMENT# L38633

TITLE:	D
NAME:	HERTEL, CHARLES R.
STREET ADDRESS:	4579 SETTLES BRIDGE ROAD
CITY-ST-ZIP	SUWANNE, GA 30174

TITLE:	P
NAME:	VINCENT, BERNARD JOSEPH
STREET ADDRESS:	1064 HIGH ROCK ROAD
CITY-ST-ZIP	RAPHINE, VA 24472

TITLE:	S
NAME:	EDDRINGTON, THOMAS
STREET ADDRESS:	14476 REUTER STRASSE CR, UNIT 2
CITY-ST-ZIP	TAMPA, FL 33613

TITLE:	T
NAME:	REID, CHRISTOPHER
STREET ADDRESS:	2530 INDIAN LAUREL ROAD
CITY-ST-ZIP	CHARLOTTESVILLE, VA 22911