2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000608

FILED Jan 30, 2009 Secretary of State

Entity Name: HISTORICAL SOCIETY OF PARKLAND FLORIDA INC.

Current Principal Place of Business: New Principal Place of Business: 6500 PARKSIDE DRIVE 6600 UNIVERSITY DRIVE PARKLAND, FL 33067 PARKLAND, FL 33067 **Current Mailing Address: New Mailing Address:** 6600 UNIVERSITY DRIVE PARKLAND, FL 33067 US FEI Number: 65-1048501 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BOCKHOLD, H.J. 7373 N.W. 82ND TERRACE PARKLAND, FL 330671099 US 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: T1Q (X) Change () Addition () Delete BOCKHOLD, JULIE SCHWARTZ, JEFFREY M Name: Name: 7373 N.W. 82ND TER., Address: 8255 TROTTERS LANE Address: City-St-Zip: PARKLAND, FL City-St-Zip: PARKLAND, FL 33067 Title: PD Title: (X) Change () Addition () Delete BOCKHOLD, H.J. Name: SCHWARTZ, JUDITH S Name: Address: 7373 NW 82ND TERR Address: 8255 TROTTERS LANE City-St-Zip: PARKLAND, FL 33067 City-St-Zip: PARKLAND, FL 33067 Title: () Delete Title: (X) Change () Addition MORAN, ANGELA HODOT, PIERRE Name: Name: 7999 NW 82ND TERRACE 8317 NW 62ND PL Address: Address: City-St-Zip: PARKLAND, FL 33067 City-St-Zip: PARKLAND, FL 33067 Title: () Delete Title: () Change (X) Addition Name: Name: WEISS, JAMES A Address: Address: 7523 NW 124TH AVENUE City-St-Zip: City-St-Zip: PARKLAND, FL 33076 Title: () Delete Title: () Change (X) Addition GOSSER, LEO Name: Name: 5893 NW 63RD WAY Address: Address: City-St-Zip: City-St-Zip: PARKLAND, FL 33067 Title: () Delete Title: () Change (X) Addition GOLDMAN, IRA Name: Name: Address: Address: 7515 NW 65 LANE PARKLAND, FL 33067 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFFREY SCHWARTZ P/D 01/30/2009