

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002616

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: HAVANA HISTORICAL SOCIETY, INC.

## Current Principal Place of Business:

1114 MAGNOLIA DR  
QUINCY, FL 32351

## New Principal Place of Business:

1114 S. MAGNOLIA DR  
QUINCY, FL 32351

## Current Mailing Address:

PO BOX 2362  
HAVANA, FL 32333

## New Mailing Address:

FEI Number: 59-3625104

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STEPHENS, ALPHIA H  
1114 MAGNOLIA DR  
QUINCY, FL 32351 US

## Name and Address of New Registered Agent:

STEPHENS, ALPHIA H  
1114 S. MAGNOLIA DR  
QUINCY, FL 32351 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:

04/29/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: STEPHENS, ALPHIA H  
Address: 1114 MAGNOLIS DRIVE  
City-St-Zip: QUINCY, FL 32351

Title: T ( ) Delete  
Name: STEPHENS, ALPHIA H  
Address: 1114 MAGNOLIA DR  
City-St-Zip: QUINCY, FL 32351

Title: S ( ) Delete  
Name: BEARE, NIKKI  
Address: 7858 HAVANA HWY.  
City-St-Zip: HAVANA, FL 32333

Title: VP ( ) Delete  
Name: KESSUP, GEORGE  
Address: POST OFFICE BOX 744  
City-St-Zip: HAVANA, FL 32333

Title: BM ( ) Delete  
Name: BERT, NICK  
Address: 103 W. 7TH STREET  
City-St-Zip: HAVANA, FL 32333

Title: RA ( ) Delete  
Name: STEPHENS, ALPHIA H  
Address: 1114 MAGNOLIA DR  
City-St-Zip: QUINCY, FL 32351

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: STEPHENS, ALPHIA H  
Address: 1114 S. MAGNOLIS DRIVE  
City-St-Zip: QUINCY, FL 32351

Title: T (X) Change ( ) Addition  
Name: STEPHENS, ALPHIA H  
Address: 1114 S. MAGNOLIA DR  
City-St-Zip: QUINCY, FL 32351

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: KEMP, GEORGE  
Address: POST OFFICE BOX 744  
City-St-Zip: HAVANA, FL 32333

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: ALPHIA H. STEPHENS

T

04/29/2009

Electronic Signature of Signing Officer or Director

Date