~2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 18, 2008 8:00 am

904. 829. 8481

Daytime Phone #

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74 KING STREET		Mailing Address POST OFFICE BOX 1027 ST. AUGUSTINE, FL 32085-1027				4002	7052			
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Addres	s							
Suite, Apt. #, etc.		Suite, Apt. #.			02142008	Chg-NP	CR2E	037 (12/06)		
City & State	в	City & State				4. FEI Number 59-367				pplied For ot Applicable
Zip	Country	Zip		Country		5. Certificate	of Status Desir	ed 🖸	\$8.75 Ad Fee Require	ditional
	6. Name and Address of Current	Registered Agent				7. Name and	Address of N	sw Registered	Agent ~	
PROCTOR, WILLIAM L				Name						
74 KING S			Street A	ddress (O. Box Numbe	er is Not Accep	table)			
	0, 0_00.									
				City				FI	Zip Coo	ie
	named entity submits this statement folions of registered agent.	r the purpose of char	iging its regi	istered office o	r register	ed agent, or bot	h, in the State	of Florida, I am	n familiar with	, and accept
SIGNATURE .	<u>. </u>									
	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE: Reg	istered Agent signal	ure required	when reinstating)		DATE		
 _	Signature, typed or printed name of registered agent			jistered Agent signal	lure required		2000000	DATE	erina propria	CAN TON
	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2008	9. Elec		gn Financing	lure required	\$5.00 May B Added to Fees	е	→ Make chec Florida Depa	rtment of S	tate .
10.	Filing Fee is \$61.25	9. Elec Trus	tion Campaig t Fund Contr	gn Financing		\$5.00 May B		Make chec Florida Depa	rtment of S	tate
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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. En Nac J

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR page alto ched.

SIGNATURE;

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February 14, 2008

2008 - Not-For-Profit Corporation Annual Report

Document #N00000007076

Historic St. Augustine Research Institute FEI: 59-3674076

Column 10, continued:

Delete:

Hamilton Upchurch 780 N. Ponce de Leon Blvd. St Augustine, FL 32084