2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2008 8:00 am
Secretary of State
02-04-2008 90034 018 ****61.25

DOCUMENT # N00000004518

1. Entity Name

THE DICKENSONIAN SOCIETY, INC.

Principal Place of Business	Mailing Address
406 EUGENIA RD. VERO BEACH FL 32963	406 EUGENIA RD. VERO BEACH FL 32963

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
5070 N. A-1-A Highway	5070 N. A-1-A Highway
Suite, Apt. #, etc.: Suite 200	Suite, Apt. #, etc.: Suite 200
City & State: Vero Beach, FL	City & State: Vero Beach, FL
Zip: FL 32963 · Country: USA	Zip: 32963 · Country: USA

1st MOORE CR2E037 (10/07)

4. FEI Number: 01-0676446 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

TAYLOR, J. ATWOOD III
5070 NORTH HIGHWAY A1A
SUITE 200
VERO BEACH FL 32963

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 $61.25
Due By May 1, 2008

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 NAME STREET ADDRESS CITY-ST-ZIP	DP TAYLOR, J. ATWOOD III 5070 NORTH A-1-A, STE 200 VERO BEACH FL 32963	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVST TAYLOR, LISA B 406 EUGENIA RD. VERO BEACH FL 32963	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: J. A. TAYLOR, III 1/26/08 772-231-4440