

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004808

FILED
Apr 06, 2009
Secretary of State

Entity Name: THE SOUTHWEST FLORIDA MUSEUM OF HISTORY FOUNDATION, INC.

Current Principal Place of Business:

1226 MELALEUCA LANE
FORT MYERS, FL 33901 US

New Principal Place of Business:

2031 JACKSON STREET
FORT MYERS, FL 33901 US

Current Mailing Address:

PO BOX 2119
FORT MYERS, FL 339022119 US

New Mailing Address:

2031 JACKSON STREET
FORT MYERS, FL 33901 US

FEI Number: 65-1026058

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRACE, WILLIAM H
1226 MELALEUCA LANE
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

MCGEE, G. TED TREAS.
2031 JACKSON STREET
FORT MYERS, FL 33901 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: G. TED MCGEE, TREASURER

04/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HEILMAN, RHONDA
Address: 1409 SW 18TH STREET
City-St-Zip: CAPE CORAL, FL 33991

Title: VPD () Delete
Name: GRACE, WILLIAM H
Address: 1226 MELALEUCA LANE
City-St-Zip: FORT MYERS, FL 33901

Title: SD () Delete
Name: BOB, ENCARNACION
Address: P.O. BOX 1970
City-St-Zip: FORT MYERS, FL 33902

Title: DT () Delete
Name: MCGEE, G. TED
Address: 1567 ROSADA WAY
City-St-Zip: FORT MYERS, FL 33901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PERKINS, KRISTEN
Address: 12530 COCONUT CREEK COURT
City-St-Zip: FORT MYERS, FL 33908 US

Title: VPD (X) Change () Addition
Name: ENCARNACION, BOB
Address: PO BOX 1970
City-St-Zip: FORT MYERS, FL 33902 US

Title: SD (X) Change () Addition
Name: HAM, OSCAR
Address: 1306 SW 10TH TERRACE
City-St-Zip: CAPE CORAL, FL 33931 US

Title: DT (X) Change () Addition
Name: MCGEE, G. TED
Address: 1567 ROSADA WAY
City-St-Zip: FORT MYERS, FL 33901 US

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: G. TED MCGEE

DT

04/06/2009

Electronic Signature of Signing Officer or Director

Date