

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000635

FILED
May 18, 2009
Secretary of State

Entity Name: FORT LAUDERDALE MARITIME MUSEUM, INC.

Current Principal Place of Business:

200 S.W. 6TH STREET
FT. LAUDERDALE, FL 33301 US

New Principal Place of Business:

Current Mailing Address:

200 S.W. 6TH STREET
FT. LAUDERDALE, FL 33301 US

New Mailing Address:

FEI Number: 26-0685098 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HARRISON, JAMES
200 S.W. 6TH STREET
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

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:

Title: TD () Delete
Name: ORSI, EDWARD
Address: 3175 ESTATES DRIVE
City-St-Zip: POMPANO BEACH, FL 33069

Title: SD () Delete
Name: RAYMOND, WILLIAM
Address: 3111 N. OCEAN DRIVE #302
City-St-Zip: HOLLYWOOD, FL 33019

Title: PD () Delete
Name: HARRISON, JAMES
Address: 200 S.W. 6TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: BOGATAY, ALAN
Address: 2017 NE 18 STREET APT 4
City-St-Zip: FORT LAUDERDALE, FL 33305

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: JAMES HARRISON

PD

05/18/2009

Electronic Signature of Signing Officer or Director

Date