2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01764

FILED Aug 30, 2004 Secretary of State

Entity Name: SANFORD HISTORICAL SOCIETY, INC.

Current Principal Place of Business: New Principal Place of Business:

520 E. FIRST ST. SANFORD, FL 32771

Current Mailing Address: New Mailing Address:

PO BOX 168

SANFORD, FL 32772 US

FEI Number: 59-2661655 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JACOBS, CARLTON J 204 LARKWOOD DRIVE SANFORD, FL 32771

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

BEST, CHRISTINE L SWANN, PATTY Name: Name: 200 MARGARET ROAD Address: 120 MAYFAIR COURT Address: SANFORD, FL 32771 City-St-Zip: City-St-Zip: SANFORD, FL 32771

Title: Title: () Delete (X) Change () Addition

JACOBS, JAY Name: JACOBS, JAY Name:

Address: 204 LARKSWOOD DRIVE Address: 204 LARKSWOOD DRIVE City-St-Zip: SANFORD, FL 32777 City-St-Zip: SANFORD, FL 32777

Title: () Delete Title: () Change () Addition

HUNT, JOE Name: Name: Address: 901 POWAATAN DRIVE Address: City-St-Zip: SANFORD, FL 32771 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

Name: STANTES, BETH Name: SKATES, BETTE Address: 1108 PARK AVE. Address: 1108 PARK AVE. City-St-Zip: SANFORD, FL 32771 City-St-Zip: SANFORD, FL 32771

Title: () Delete Title: (X) Change () Addition

FISHER, SERENA GRACE, STINECIPHER M Name: Name: 850 LEOPARD TRAIL 2401 OAK AVENUE Address: Address: City-St-Zip: WINTER SPRINGS, FL 32708 City-St-Zip: SANFORD, FL 32771

Title: () Delete Title: (X) Change () Addition HODGINS, PAUL WILLIAMS, CONNIE Name: Name:

Address: 119 LOCKWOOD DRIVE Address: 1203 WASHINGTON DRIVE SANFORD, FL 32771 SANFORD, FL 32771 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOSEPH F. HUNT **TRES** 08/30/2004