

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N02000004093

1. Entity Name
FRIENDS OF THE MUSEUM OF FLORIDA HISTORY, INC.



04 APR 29 PM 4:00

RECEIVED BY STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
500 SOUTH BRONOUGH STREET
TALLAHASSEE, FL 32301

Mailing Address
500 SOUTH BRONOUGH STREET
TALLAHASSEE, FL 32301



2. Principal Place of Business

3. Mailing Address

01072004 Chg-NP CR2E037 (10/03)

4. FEI Number
04-3676479

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCLEOD, STEPHEN
500 SOUTH BRONOUGH STREET
TALLAHASSEE, FL 32301

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 *Stephen J. McLeod*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

January 8, 2004
DATE

Filing Fee is \$61.25
Due by May 1, 2004

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

TITLE D ☐ Delete
NAME BUZZET, WILLIAM
STREET ADDRESS 100 BECKRICH ROAD., SUITE 200
CITY-ST-ZIP PANAMA CITY BEACH, FL 32407

TITLE D ☐ Delete
NAME WASKOM, ELSBETH G
STREET ADDRESS 1515 RINGLING BOULEVARD
CITY-ST-ZIP SARASOTA, FL 34236

TITLE D ☐ Delete
NAME TIGER, LEE
STREET ADDRESS 2461 SOUTHWEST 85TH TERRACE
CITY-ST-ZIP FT LAUDERDALE, FL 33324

TITLE D ☐ Delete
NAME MCLEOD, STEPHEN
STREET ADDRESS 500 SOUTH BRONOUGH STREET
CITY-ST-ZIP TALLAHASSEE, FL 32301

TITLE D ☐ Delete
NAME HARDING, MAJOR B
STREET ADDRESS 705 NORTH RIDE
CITY-ST-ZIP TALLAHASSEE, FL 32303

TITLE D ☐ Delete
NAME HUNT, ROY
STREET ADDRESS 2721 SW 4TH PLACE
CITY-ST-ZIP GAINESVILLE, FL 32607

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
NAME Abberger, Lester
STREET ADDRESS Post Office Box 1168
CITY-ST-ZIP Tallahassee, Florida 32302-1168

TITLE ☐ Change ☒ Addition
NAME Jordan, Bruce C.
STREET ADDRESS 1530 Metropolitan Boulevard
CITY-ST-ZIP Tallahassee, Florida 32308

TITLE ☐ Change ☒ Addition
NAME Kearney, Debby
STREET ADDRESS 7615 Buck Lake Road
CITY-ST-ZIP Tallahassee, Florida 32311

TITLE ☐ Change ☒ Addition
NAME Brunson, Jeana Ph.D.
STREET ADDRESS 500 South Bronough Street
CITY-ST-ZIP Tallahassee, Florida 32399-0250

TITLE ☒ Change ☐ Addition
NAME McLeod, Stephen
STREET ADDRESS 500 South Bronough Street
CITY-ST-ZIP Tallahassee, Florida 32399-0250

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
000034781950
04/30/04--01006--013 **61.25

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Stephen J. McLeod*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 8, 2004
Date

850.245.6375
Daytime Phone #