## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000002521

FILED Jan 12, 2008 Secretary of State

Entity Name: MANATEE COUNTY HISTORICAL SOCIETY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 4501 MANATEE AVE W, #303 BRADENTON, FL 342093952 **Current Mailing Address: New Mailing Address:** 4501 MANATEE AVE W, #303 BRADENTON, FL 342093952 FEI Number: 51-0469762 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: GARST, CLAFLIN JR 4804 MÁNATEE AVE W BRADENTON, FL 342093854 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition LOOMIS, REV. HERBERT Name: AKERS, JEANNE Name: 1533 4TH AVENUE WEST, APT 314 Address: 849 49TH STREET COURT WEST Address: City-St-Zip: BRADENTON, FL 34205 City-St-Zip: BRADENTON, FL 34209 Title: () Delete Title: () Change () Addition Name: BAILEY, JAMES T Name: Address: 302 9TH AVE S Address: City-St-Zip: PALMETTO, FL 34221 City-St-Zip: Title: () Delete Title: () Change () Addition MASSEY, MARY LOU Name: Name: 3910 40TH STREET WEST Address: Address: City-St-Zip: BRADENTON, FL 34205 City-St-Zip: Title: ( ) Delete Title: () Change () Addition BAILEY, TRUDY Name: Name: 302-9TH AVE E Address: Address: City-St-Zip: PALMETTO, FL 34221 City-St-Zip: Title: () Delete Title: () Change () Addition BOLING, LIZ Name: Name: 1103-39TH ST W Address: Address: City-St-Zip: BRADENTON, FL 34205 City-St-Zip: Title: () Delete Title: () Change () Addition LOCKE, NANCY Name: Name: Address: 4009 17TH AVENUE WEST Address: BRADENTON, FL 34205 City-St-Zip: 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: PAMELA N. GIBSON EX-P 01/12/2008