

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004397

FILED
May 10, 2010
Secretary of State

Entity Name: OLDSMAR HISTORICAL SOCIETY, INC.

Current Principal Place of Business:

% LORETTA WYANDT
400 ST PETE DR E
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

% LORETTA WYANDT
400 ST PETE DR E
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: 56-2347112 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

Name and Address of New Registered Agent:

WYANDT, LORETTA
601 SHORE DRIVE EAST
OLDSMAR, FL 34677 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:

Title: PRES
Name: MANNY, EDWARD
Address: 201 SHORE DRIVE EAST
City-St-Zip: OLDSMAR, FL 34677

Title: VP
Name: CHAMBERS, ROSEMARIE
Address: 354 SHORE DRIVE EAST
City-St-Zip: OLDSMAR, FL 34677

Title: TREA
Name: SAPIEGA, EDWARD L
Address: 103 ARLINGTON AVENUE EAST
City-St-Zip: OLDSMAR, FL 34677

Title: SECR
Name: LARSON, DOROTHY
Address: 206 LEXINGTON STREET
City-St-Zip: OLDSMAR, FL 34677

Title: PASP
Name: WYANDT, LORETTA
Address: 601 SHORE DRIVE EAST
City-St-Zip: OLDSMAR, FL 34677

I hereby 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 all other like empowered.

SIGNATURE: EDWARD L. SAPIEGA <ELECTRONIC>

TREA

05/10/2010

Electronic Signature of Signing Officer or Director

Date