

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90318 047 ****61.25

DOCUMENT # N04000002391 1. Entity Name GERMAN HISTORICAL RESEARCH SOCIETY, INC.					
Principal Place of Business 3837 NORTHDAL BLVD STE 146 TAMPA, FL 33624			Mailing Address 3837 NORTHDAL BLVD STE 146 TAMPA, FL 33624		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 16-1699473	
				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		
DOUGHERTY, LYNN 4722 WINDFLOWER CIR TAMPA, FL 33624			Name Dougherty, Lynn Street Address (P.O. Box Number is Not Acceptable) 3837 Northdale Blvd, Suite 146 City Tampa		
			FL Zip Code 33624		
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: <i>Lynn Dougherty</i> DATE: 4-11-05 Signature, word or printed name of registered agent and title, as above. (NOTE: Registered Agent signature required when necessary)					
Filing Fee is \$61.25 Due by May 1, 2005		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EO IRSLINGER, WENDELIN LINDENSTRASSE 3, 77749 HOHBERGM GERMANY.	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EO Irslinger, Wendelin 3837 Northdale Blvd, Suite 146 Tampa, FL 33624	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OP/O DOUGHERTY, LYNN 4722 WINDFLOWER CIR TAMPA, FL 33624	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	OP/O Dougherty, Lynn 3837 Northdale Blvd, Suite 146 Tampa, FL 33624	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Smith, James K.L. 3837 Northdale Blvd, Suite 146 Tampa, FL 33624	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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: <i>Lynn Dougherty</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE: 4-11-05 813-960-2116 DATE OF FILING		