2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006624

City-St-Zip:

FILED May 13, 2008 Secretary of State

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Entity Na	me: SEMINOLE HISTORICAL SOCIETY	, INC.
Current P	rincipal Place of Business:	New Principal Place of Business:
	INOLE BLVD E, FL 33772	
Current M	lailing Address:	New Mailing Address:
	INOLE BLVD E, FL 33772	
In accordan	: 20-1880424 FEI Number Applied For (ice with s. 607.193(2)(b), F.S., the corporation	lid not receive the prior notice.
	I Address of Current Registered Agen	t: Name and Address of New Registered Agent:
	R, TIMOTHY C ESQ	
	INOLE BLVD E, FL 33772 US	
	e named entity submits this statement for e of Florida.	the purpose of changing its registered office or registered agent, or both
SIGNATUI	RE:	
	Electronic Signature of Registered	Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
Title: Name: Address: City-St-Zip:	P () Delete OLIPHANT, KRISTEN 14787 BREWSTER DR LARGO, FL 33774	Title: PRES (X) Change () Addition Name: SAYLOR, MICHAEL Address: 6621 121ST ST. NO. City-St-Zip: SEMINOLE, FL 33772
Title: Name: Address: City-St-Zip:	O () Delete PHILLIPS, DOROTHY A 6827 TEQUESTA DR SEMINOLE, FL 33777	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	S () Delete RUSSELL, MARY 14158 88TH AVE SEMINOLE, FL 33776	Title: TRES (X) Change () Addition Name: HADDAD, JO ANNE Address: 10335 LONGWOOD DR. City-St-Zip: LARGO, FL 33777
Title: Name: Address: City-St-Zip:	VP () Delete BARLOW, NANCY OAKHURST RD. SEMINOLE, FL 33772	Title: VP (X) Change () Addition Name: HARRIS, GENE Address: 1001 STARKEY RD. City-St-Zip: SEMINOLE, FL 33776
Title: Name: Address:	() Delete	Title: SEC () Change (X) Addition Name: RUSSELL, MARY Address: 8298 139TH LANE NO.

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.

City-St-Zip:

SEMINOLE, FL 33776

SIGNATURE: JO ANNE HADDAD TRES 05/13/2008