## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000010026

FILED Mar 21, 2009 Secretary of State

Entity Name: EVERGLADES SOCIETY FOR HISTORIC PRESERVATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

102 COPELAND & BROADWAY EVERGLADES CITY, FL 34139 US

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 46

EVERGLADES CITY, FL 34139 US

FEI Number: 20-2229534 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:

HUFF, PATRICIA A HUFF, PATRICIA A

207 N STORTER AVE 207 STORTER AVE NORTH

EVERGLADES CITY, FL 34139 EVERGLADES CITY, FL 34139 US 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: PATRICIA A. HUFF 03/21/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition HUFF, PATRICIA A HUFF, PATRICIA A Name: Name: 207 NORTH STORTER AVENUE Address: 207 STORTER AVENUE NORTH Address: City-St-Zip: EVERGLADES CITY, FL 34139 US City-St-Zip: EVERGLADES CITY, FL 34139 US

Title: Title: (X) Change ( ) Addition ( ) Delete BARNES, ROBIN Name: RACKLEY, JANE Name:

Address: 61 WEST FLAMINGO DR Address: 201 COPELAND AVENUE NORTH

City-St-Zip: EVERGLADES CITY, FL 34139 US City-St-Zip: EVERGLADES CITY, FL 34139 US

Title: CO-C () Delete Title: D-VP (X) Change ( ) Addition

MOSEMAN, CAROL DANOSKY, MIKE Name: Name:

710 BUCKNER AVENUE 302 COPELAND AVENUE NORTH Address: Address: City-St-Zip: EVERGLADES CITY, FL 34139 US City-St-Zip: EVERGLADES CITY, FL 34139 US

Title: () Delete Title: (X) Change ( ) Addition

Name: RINKEVICH, PAT Name: RINKEVICH, PAT 312 NORTH STORTER AVENUE 312 STORTER AVENUE NORTH Address: Address:

City-St-Zip: EVERGLADES CITY, FL 34139 US City-St-Zip: EVERGLADES CITY, FL 34139 US

Title: () Delete Title: (X) Change ( ) Addition REPKO, MARYA Name: Name: REPKO, MARYA

102 EAST BRAODWAY 102 EAST BROADWAY Address: Address:

City-St-Zip: EVERGLADES CITY, FL 34139 US City-St-Zip: EVERGLADES CITY, FL 34139 US

Title: () Delete Title: (X) Change ( ) Addition KLEIN MIKE SCHULTZ, JEAN Name: Name:

Address: OUTDOOR RESORTS OF AMERICA Address: 208 ALLEN AVENUE

EVERGLADES CITY, FL 34139 US CHOKOLOSKEE, FL 34138 US 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: MARYA REPKO D-P 03/21/2009

Electronic Signature of Signing Officer or Director

Date