2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2011
Secretary of State

DOCUMENT# N05000005087

Entity Name: THE ORIGINAL TREASURE ISLAND HISTORICAL SOCIETY, INC.

Current Principal Place of Business:

P. O. BOX 9569
TREASURE ISLAND, FL 33740 US

New Principal Place of Business:

64 DOLPHIN DR.
TREASURE ISLAND, FL 33706 US

Current Mailing Address:

6439 CENTRAL AVENUE
SAINT PETERSBURG, FL 33710 US

New Mailing Address:

FEI Number: 20-3332170 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIMONE, STEPHEN CPA
6439 CENTRAL AVENUE
SAINT PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

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: P
Name: WHITE, DONNA
Address: 8401 W. GULF BLVD.
City-St-Zip: TREASURE ISLAND, FL 33706 US

Title: VP
Name: MALKIN, CAROL L
Address: 12546 CAPRI CIRCLE NORTH
City-St-Zip: TREASURE ISLAND, FL 33706 US

Title: T
Name: COWARD, CAROL L
Address: 64 DOLPHIN DR.
City-St-Zip: TREASURE ISLAND, FL 33706 US

Title: D
Name: NELSON, LOIS E
Address: 11020 1ST ST. EAST
City-St-Zip: TREASURE ISLAND, FL 33706

Title: S
Name: WALSH, SUSAN
Address: 10124 PARADISE BLVD.
City-St-Zip: TREASURE ISLAND, FL 33706 US

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: CAROL L. COWARD T 02/28/2011

Electronic Signature of Signing Officer or Director Date