2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06075

FILED Apr 16, 2009 Secretary of State

Entity Name: CORTEZ VILLAGE HISTORICAL SOCIETY, INCORPORATED

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

4527-123 ST W 4527-123 ST W

PO BOX 663 CORTEZ, FL 34215 US CORTEZ, FL 34215

Current Mailing Address: New Mailing Address:

PO BOX 663 4527-123 ST W CORTEZ, FL 34215 PO BOX 663

CORTEZ, FL 34215 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GREEN, MARY FULFORD 4527-123 ST CT W CORTEZ, FL 34215 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:

Clarkeria Cinnakura of Davietanad Araut

Electronic Signature of Registered Agent

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition

 Title:
 PD () Delete
 Title:
 PD (X) Change (

 Name:
 FULFORD RALPH M.
 Name:
 FULFORD RALPH M.

 Address:
 12112 45TH AVENUE W.
 Address:
 12112 45TH AVENUE W.

City-St-Zip: CORTEZ, FL City-St-Zip: CORTEZ, FL 34215

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

 Name:
 MOLTO LINDA
 Name:
 MOLTO LINDA

 Address:
 4519 124TH AST. W.
 Address:
 4519 124TH AST. W.

 City-St-Zip:
 CORTEZ, FL
 CORTEZ, FL
 34215

Title: TD () Delete Title: () Change () Addition

 Name:
 GREEN, MARY FULFORD
 Name:

 Address:
 4527 123 ST W
 Address:

 City-St-Zip:
 CORTEZ, FL 34215
 City-St-Zip:

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

Name: HOWEY, HARRY Name: HOWEY, HARRY

Address: CORTEZ TARILER PARK-126 ST. Address: CORTEZ TRAILER PARK-126 ST.

City-St-Zip: CORTEZ, FL City-St-Zip: CORTEZ, FL 34215

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: MARY FULFORD GREEN TREA 04/16/2009