

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06075

**FILED**  
**Mar 25, 2010**  
**Secretary of State**

**Entity Name:** CORTEZ VILLAGE HISTORICAL SOCIETY, INCORPORATED

**Current Principal Place of Business:**

4527-123 ST W  
CORTEZ, FL 34215 US

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

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:**

GREEN, MARY FULFORD  
4527-123 ST CT W  
CORTEZ, FL 34215 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: PD  
Name: FULFORD RALPH M.  
Address: 12112 45TH AVENUE W.  
City-St-Zip: CORTEZ, FL 34215

Title: SD  
Name: MOLTO LINDA  
Address: 4519 124TH AST. W.  
City-St-Zip: CORTEZ, FL 34215

Title: TD  
Name: GREEN, MARY FULFORD  
Address: 4527 123 ST W  
City-St-Zip: CORTEZ, FL 34215

Title: VPD  
Name: HOWEY, HARRY  
Address: CORTEZ TRAILER PARK-126 ST.  
City-St-Zip: CORTEZ, FL 34215

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: MARY FULFORD GREEN

TD

03/25/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date