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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # N06888

1, Corporation Name

(4)

FLORIDA AGRICULTURAL MUSEUM, INC.

FILED May 19 1997 8:00am Secretary of State

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	Business	Mailing Address			8121. 21611 41811 61211 81611	
3125 CONNER BLVD. 3125 CONNER		3125 CONNER BLVD. TALLAHASSEE FL 32399-61	576			
ALLAFINOSEE FL SA	√ 00.€ (∩20	THURNINGUEE TE BEBBBB		3. Date Incorporated or Qualified 12/31/1984	3a. Date of Last Re 02/07/1996	port
2. Principal Place	of Business INCESS ESTATE RD	2a. Mailing Address 26 P.O. Box	254844	4. FEI Number 59-2659573		plied For Applicable
Suite, Apt. #. et		Suite, Apt. #, etc.	79 1 - 1 1	5. Certificate of Status Desired	\$8.75 A	dditional
City & State	4 E1	City & State	ST FL	6. Election Campaign Financing	\$5.00	May Be
3 Paun Co	Country	28 PACM COA:	Country	Trust Fund Contribution 8. This corporation has liability for in	Added to ntangible tax under s.	
432135	25 FLAGLER	20 32135	30 FLAGLER	Florida Statutes	Yes No	
9.	Name and Address of Current	Registered Agent	81 Name-D	10. Name and Address of New Rec	gistered Agent	
JOHN MI CT	EAD		1 1 15	RULE PIATEL		·——·
JOHN MILSTI	RICULTURAL MUSEUM		82 Freet Add	dress (P.O. Box Number is Not Acceptable	e)	0040
3125 CONNE			83	BOX 754844/1850P	M(400)) 651.	COAD
	E FL 32399-1650		PALM	COAST		·····
INLLNINOOL	T I C 05088-1000		84 City		FL 85 72	0de <
11. Pursuant to the	e provisions of Sections 617.0502	and 617.1508, Florida Statu	utes, the above-named cor	rporation submits this statement for the pr		registered
office or regist	lived agent or both, if the State of	of Florida, Such change was	authorized by the corpora	rporation submits this statement for the pu ation's board of directors. I hereby accep	t the appointment as r	registered
\sim	Thind will raid accept the congar	BRUE PIA	PIEK - MUSE	an Dallar or	4/0142	
SIGNATURE SITE	rule for ed craumted name of registered agent		TE: Registered Agent signature requ	uired when reinstating)	DAYE	,
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC		
TITLE		DELETE	LI TITLE T		Change	Addition
	II ATEAN IAIMI					
	ilstead, John		1.2 NAME	Bruce maquire	han	
STREET ADDRESS 21	14 SOUTH BRONOUGH STREE	ET	1.3 STREET ADDRESS 4	199 IMTERMATIONAL P	rwy	
STREET ADDRESS 21		_	1.3 STREET ADDRESS 4	199 IMTERMATIONAL P IT. AUGUSTINE, FL 32	.085	
STREET ADDRESS 21 CITY-ST-ZIP TA	14 South Bronough Strei Allahassee Fl	ET DELETE	1.3 STREET ADDRESS 4	199 IMTERMATIONAL P	-085 Change	☐ Addition
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