

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002339

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: GROVELAND HISTORICAL SOCIETY, INC.

**Current Principal Place of Business:**

250 SOUTH MAIN AVE  
GROVELAND, FL 34736

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 761  
GROVELAND, FL 34736

**New Mailing Address:**

FEI Number: 20-8559755

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAW, JULIA R  
250 SOUTH MAIN AVE  
GROVELAND, FL 34736 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: DP ( ) Delete  
Name: PADGETT, MARIE  
Address: 564 E. MAGNOLIA STREET  
City-St-Zip: GROVELAND, FL 34746

Title: D VP ( ) Delete  
Name: EVANS, BILLY  
Address: 101 JAMES PLACE  
City-St-Zip: GROVELAND, FL 34736

Title: DT ( ) Delete  
Name: FLEETWOOD, CONNIE  
Address: 911 S IOWA AVE  
City-St-Zip: GROVELAND, FL 34736

Title: DS ( ) Delete  
Name: MYERS, MARY HELEN  
Address: 18531 TUSCANOOGA ROAD  
City-St-Zip: GROVELAND, FL 34736

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D VP (X) Change ( ) Addition  
Name: KING, HOWARD  
Address: 5811 BRASHER LANE  
City-St-Zip: GROVELAND, FL 34736

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: MARIE PADGETT

DP

04/17/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date