

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000085

FILED  
Apr 27, 2012  
Secretary of State

Entity Name: FLORIDA HISTORY FOUNDATION, INC

## Current Principal Place of Business:

8732 N. PAWNEE AVE.  
TAMPA, FL 33617

## New Principal Place of Business:

15215 LIVINGSTON AVE.  
APT. 115  
LUTZ, FL 33559

## Current Mailing Address:

P. O. BOX 291581  
TAMPA, FL 33687

## New Mailing Address:

15215 LIVINGSTON AVE.  
APT. 115  
LUTZ, FL 33559

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

## Name and Address of Current Registered Agent:

BUTTS, CLIFTON A  
8732 N PAWNEE AVE  
TAMPA, FL 33617    US

## Name and Address of New Registered Agent:

BUTTS, CLIFTON A  
15215 LIVIGNSTON AVE.  
APT. 115  
LUTZ, FL 33559 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/27/2012

Date

## OFFICERS AND DIRECTORS:

Title: P/D  
Name: BUTTS, CLIFTON A  
Address: 15215 LIVINGSTON AVE.  
City-St-Zip: LUTZ, FL 33559 US

Title: VP/D  
Name: BURKETT, KERRI T  
Address: 1933 E - 151ST AVE  
City-St-Zip: TAMPA, FL 33549 US

Title: D  
Name: HOWELL, MARY S  
Address: 1933 E 151ST AVE  
City-St-Zip: LUTZ, FL 33549 US

Title: D  
Name: BURKETT, IAN F  
Address: 1933 E 151ST AVE  
City-St-Zip: LUTZ, FL 33549 US

Title: S/T  
Name: SCANDLING, ANN H  
Address: 15215 LIVINGSTON AVE.  
City-St-Zip: LUTZ, FL 33559 US

Title: D  
Name: TOWNSON, KRISTI L  
Address: 15215 LIVINGSTON AVE.  
City-St-Zip: LUTZ, FL 33559 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: CLIFTON A. BUTTS

Electronic Signature of Signing Officer or Director

P/D

04/27/2012

Date