

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010515

FILED  
Mar 21, 2009  
Secretary of State

Entity Name: COALWOOD WV HISTORICAL SOCIETY, INC.

## Current Principal Place of Business:

505 BUCK LAKE LANE  
GENEVA, FL 32732

## New Principal Place of Business:

## Current Mailing Address:

505 BUCK LAKE LANE  
GENEVA, FL 32732

## New Mailing Address:

PO BOX 1479  
GENEVA, FL 32732 US

FEI Number: 26-3637899

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD.  
SUITE A-100  
TAMPA, FL 33612 US

## Name and Address of New Registered Agent:

STALKER, MARY T TAS  
505 BUCK LAKE LANE  
GENEVA, FL 32732 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: MARY T. STALKER

03/21/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GOAD, DAVID  
Address: 505 BUCK LAKE LANE  
City-St-Zip: GENEVA, FL 32732

Title: S ( ) Delete  
Name: SMADES, DEBBIE  
Address: 505 BUCK LAKE LANE  
City-St-Zip: GENEVA, FL 32732

Title: T ( ) Delete  
Name: STALKER, MARY  
Address: 505 BUCK LAKE LANE  
City-St-Zip: GENEVA, FL 32732

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GOAD, DAVID  
Address: 505 BUCK LAKE LANE  
City-St-Zip: GENEVA, FL 32732 US

Title: S (X) Change ( ) Addition  
Name: SMADES, DEBBIE  
Address: 505 BUCK LAKE LANE  
City-St-Zip: GENEVA, FL 32732 US

Title: TAS (X) Change ( ) Addition  
Name: STALKER, MARY  
Address: 505 BUCK LAKE LANE  
City-St-Zip: GENEVA, FL 32732 US

Title: V ( ) Change (X) Addition  
Name: DATE, STEVE  
Address: 505 BUCK LAKE LANE  
City-St-Zip: GENEVA, FL 32732 US

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 T. STALKER

TAS

03/21/2009

Electronic Signature of Signing Officer or Director

Date