

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08326

FILED
Aug 30, 2006
Secretary of State

Entity Name: LEMON BAY HISTORICAL SOCIETY, INC.

Current Principal Place of Business:

P.O. BOX 1245
ENGLEWOOD, FL 342951245

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1245
ENGLEWOOD, FL 342951245

New Mailing Address:

FEI Number: 65-0128230 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

POLLARD, JAMES L
720 SUNCREST LN
ENGLEWOOD, FL 34223 US

Name and Address of New Registered Agent:

KRANTZ, HERBERT J
1161 NORTH LANE
ENGLEWOOD, FL 34224 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: H.J. KRANTZ

08/30/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: POLLARD, JAMES L
Address: 720 SUNCREST LN
City-St-Zip: ENGLEWOOD, FL 34223

Title: PD () Delete
Name: PLATT, DON
Address: 1936 PENNSYLVANIA AVE
City-St-Zip: ENGLEWOOD, FL 34224

Title: VPD () Delete
Name: NUGENT, BETTY J
Address: 604 W PERRY ST
City-St-Zip: ENGLEWOOD, FL 34223

Title: SD () Delete
Name: HICKS, CHARLES
Address: 425 N OXFORD DR
City-St-Zip: ENGLEWOOD, FL 34223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: KRANTZ, HERBERT J
Address: 1161 NORTH LANE
City-St-Zip: ENGLEWOOD, FL 34224

Title: PD (X) Change () Addition
Name: HICKS, CHARLES
Address: 425 N OXFORD DR
City-St-Zip: ENGLEWOOD, FL 34223

Title: VPD (X) Change () Addition
Name: POLLARD, JAMES L
Address: 720 SUNCREST LN
City-St-Zip: ENGLEWOOD, FL 34223

Title: SD (X) Change () Addition
Name: GARRETT, CAROL
Address: 4522 CULBREATH AVE
City-St-Zip: TAMPA, FL 33609

I hereby certify that the information supplied with this filing does not qualify for the 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: H. J. KRANTZ

TD

08/30/2006

Electronic Signature of Signing Officer or Director

Date