2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 28, 2006 8:00 am Secretary of State DOCUMENT # N08609 1. Entity Name 03-28-2006 90135 018 ****61.25 CALLAWAY HISTORICAL SOCIETY, INC. Principal Place of Business Mailing Address 522 BEULAH AVENUE **522 BEULAH AVENUE** P.O. BOX 6082 PANAMA CITY FL 32404 P.O. BOX 6082 PANAMA CITY FL 32404 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 59-2596231 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHUSTER, BERTIE B. Street Address (P.O. Box Number is Not Acceptable) 5207 TERI LANE PANAMA CITY FL 32402 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typnd or printed name of registered agont and little if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ☐ Delete TITLE THLE Change Addition 4 PATTERSON, LILLIAN MRS NAME NAME STREET ADDRESS 134 SOUTH MARY ELLA AVE STREET ADDRESS CITY-ST-ZIP PANAMA CITY FL 32404 CITY-ST-ZIP TITLE XX Change TITLE XX Delete ☐ Addition VPD BOZEMAN, DEANE S MRS NAME Hogan, Mr. Robert M. STREET ADDRESS 252 NORTH MARY ELLA AVE STREET ADDRESS 6151 Hogan Road PANAMA CITY FL 32404 CITY-ST-ZIP CITY-ST-ZIP Panama City, Florida 32404-755 Addition XX Delete THE SD TITLE SD Edwards, Mrs. Mary Lou NAME WILLIAMS, DORIS MRS NAME STREET ADDRESS 217 Collinfurst Sq. STREET ADDRESS 7414 WALKER DRIVE CITY-ST-ZIP PANAMA CITY FL 32404 CITY-ST-ZIP Panama City, Florida 32404-4831 ☐ Delete TITLE Addition TITLE NAME HOGAN, JACQUEINE S MRS NAME STREET ADDRESS STREET ADDRESS 6151 HOGAN RD PANAMA CITY FL 32404-7557 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

illian Patterson
ENATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 20, 2006 (850) 871-0522

FILED