

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004100

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** THE FLORIDA HISTORIC CAPITOL FOUNDATION, CORPORATION

**Current Principal Place of Business:**

HISTORIC CAPITOL, B-06  
400 S MONROE STREET  
TALLAHASSEE, FL 323991100

**New Principal Place of Business:**

**Current Mailing Address:**

HISTORIC CAPITOL, B-06  
400 S MONROE STREET  
TALLAHASSEE, FL 323991100

**New Mailing Address:**

**FEI Number:** 27-2440684

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PHELPS, JOHN B  
HISTORIC CAPITOL, B-06  
400 S MONROE STREET  
TALLAHASSEE, FL 323991100 US

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

PURVIS, MICHELLE G  
HISTORIC CAPITOL, B-06  
400 S MONROE STREET  
TALLAHASSEE, FL 323991100 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:** MICHELLE GAMMON PURVIS

04/20/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** BOOK, RONALD L  
**Address:** 18851 NE 29TH AVENUE STE 1010  
**City-St-Zip:** AVENTURA, FL 33180

**Title:** D  
**Name:** CARLTON, LISA  
**Address:** 9420 SIDELL ROAD  
**City-St-Zip:** SIDELL, FL 34266

**Title:** D  
**Name:** HARRIS, PETER O  
**Address:** PO BOX 10970  
**City-St-Zip:** TALLAHASSEE, FL 32302

**Title:** D  
**Name:** CASTOR, ELIZABETH  
**Address:** 445 S. 12TH ST. 1506  
**City-St-Zip:** TAMPA, FL 33606

**Title:** D  
**Name:** MICA, DAVID R  
**Address:** 215 SOUTH MONROE STREET STE 800  
**City-St-Zip:** TALLAHASSEE, FL 32301

**Title:** D  
**Name:** SMATHERS, BRUCE A  
**Address:** 4051 NORTH TIMUQUANA ROAD  
**City-St-Zip:** JACKSONVILLE, FL 32210

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:** BRUCE A SMATHERS

D

04/20/2011

Electronic Signature of Signing Officer or Director

Date