

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004677

FILED  
Apr 24, 2011  
Secretary of State

**Entity Name:** THE HISTORY MUSEUM OF JENSEN BEACH INC.

**Current Principal Place of Business:**

1900 RICOU TERRACE, BOX 1536  
JENSEN BEACH, FL 349581536

**New Principal Place of Business:**

1900 RICOU TERRACE  
JENSEN BEACH, FL 349581536

**Current Mailing Address:**

1900 RICOU TERRACE, BOX 1536  
JENSEN BEACH, FL 349581536

**New Mailing Address:**

**FEI Number:** 27-2566756

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRECHBILL, MARK  
215 SW FEDERAL HWY STE 100  
STUART, FL 34994 US

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

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: TIMON, JAN  
Address: 1900 RICOU TERRACE, BOX 1536  
City-St-Zip: JENSEN BEACH, FL 349581536

Title: VD  
Name: TEAL, DEVIN  
Address: 1900 RICOU TERRACE, BOX 1536  
City-St-Zip: JENSEN BEACH, FL 349581536

Title: TSD  
Name: CAUDILL, PAT  
Address: 1900 RICOU TERRACE, BOX 1536  
City-St-Zip: JENSEN BEACH, FL 349581536

Title: D  
Name: WALTON, BONNIE  
Address: 1900 RICOU TERRACE, BOX 1536  
City-St-Zip: JENSEN BEACH, FL 349581536

Title: D  
Name: ROSE, RON  
Address: 1900 RICOU TERRACE, BOX 1536  
City-St-Zip: JENSEN BEACH, FL 349581536

Title: D  
Name: CHANG, JEWELL  
Address: 1900 RICOU TERRACE, BOX 1536  
City-St-Zip: JENSEN BEACH, FL 349581536

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: JAN TIMON

PD

04/24/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date