

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000005488

FILED
Apr 20, 2011
Secretary of State

Entity Name: CIVIL RIGHTS MUSEUM OF ST. AUGUSTINE, INC.

Current Principal Place of Business:

19 RIBERIA STREET
ST. AUGUSTINE, FL 32084 US

New Principal Place of Business:

Current Mailing Address:

19 RIBERIA STREET
ST. AUGUSTINE, FL 32084 US

New Mailing Address:

FEI Number: 27-4673208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOLES, JOSEPH L JR
19 RIBERIA STREET
ST. AUGUSTINE, FL 32084 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: D
Name: BURTON, RICHARD P
Address: 458 PORTOBELLO DRIVE
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: D
Name: JOHNSON, J.T.
Address: 950 BURNT HICKORY DRIVE
City-St-Zip: ATLANTA, GA 30311 US

Title: D
Name: HAYLING, ROBERT B DR
Address: 4351 NW 15 STREET
City-St-Zip: LAUDERHILL, FL 33313 US

Title: D
Name: BREIDENSTEIN, ANN
Address: 117 BRIDGE STREET
City-St-Zip: ST AUGUSTINE, FL 32084 US

Title: D
Name: DUNCAN, PRISCILLA
Address: C/O 19 RIBERIA STREET
City-St-Zip: ST AUGUSTINE, FL 32084 US

Title: D
Name: NOLAN, DAVID
Address: C/O 19 RIBERIA STREET
City-St-Zip: ST AUGUSTINE, FL 32084 US

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: JOSEPH L. BOLES, JR.

DIR

04/20/2011

Electronic Signature of Signing Officer or Director

Date