

# **2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N15196

**FILED**  
**Mar 01, 2010**  
**Secretary of State**

**Entity Name:** THE MARION COUNTY HISTORICAL ASSOCIATION, INC.

**Current Principal Place of Business:**

2230 S.E. 8TH STREET  
OCALA, FL 344712683

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5002  
OCALA, FL 34478

**New Mailing Address:**

**FEI Number:** 59-2700978

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMAS, VANESSA  
11788 NE 142ND PLACE  
FORT MC COY, FL 32134 US

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

THOMAS, VANESSA  
723 EAST FORT KING STREET  
OCALA, FL 34471 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: VANESSA THOMAS

03/01/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: THOMAS, VANESSA  
Address: P.O. BOX 14  
City-St-Zip: FORT MC COY, FL 32134

Title: VD  
Name: COOK, DAVID  
Address: 7110 SW 27TH AVE  
City-St-Zip: OCALA, FL 34471

Title: SD  
Name: RICHARD, HELEN  
Address: 2238 S.E. 8TH ST.  
City-St-Zip: OCALA, FL 34471

Title: TD  
Name: ELLSPERMANN, DAVID  
Address: P.O. 1030  
City-St-Zip: OCALA, FL 34478

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: VANESSA THOMAS

PD

03/01/2010

Electronic Signature of Signing Officer or Director

Date