

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17925

FILED
Jan 14, 2009
Secretary of State

Entity Name: WINTER PARK HISTORICAL ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 51
WINTER PARK, FL 32790

New Principal Place of Business:

151 W LYMAN AVE
WINTER PARK, FL 32789

Current Mailing Address:

PO BOX 51
WINTER PARK, FL 32790

New Mailing Address:

P.O. BOX 51
WINTER PARK, FL 32790

FEI Number: 59-1664195

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAINES, JOHN, DEM
716 N INTERLACHEN AVE
WINTER PARK, FL 32789 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: DO () Delete
Name: MARGIO, NINA H
Address: 457 LAKE HOWELL RD
City-St-Zip: MAITLAND, FL 32751

Title: DO () Delete
Name: WARNER, PITT
Address: 871 VIRGINIA DRIVE
City-St-Zip: WINTER PARK, FL 32789

Title: DO () Delete
Name: JAMES, KAREN
Address: 1551 DALE AVE
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NINA H MARGIO

DO

01/14/2009

Electronic Signature of Signing Officer or Director

_____ Date