

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 09, 2006 8:00 am
Secretary of State

02-09-2006 90043 002 ****70.00

DOCUMENT # N28474

1. Entity Name

WALTON COUNTY HERITAGE ASSOCIATION, INC.



Principal Place of Business

P O BOX 1681
DEFUNIAK SPRINGS FL 32433-5161
US

Mailing Address

P O BOX 1681
DEFUNIAK SPRINGS FL 32435
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2910063

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VAN STATE, JAN OLIVER
836 CIRCLE DRIVE
DEFUNIAK SPRINGS FL 32435

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
VAN STATE, JAN OLIVER
836 CIRCLE DRIVE
DEFUNIAK SPRINGS FL 32435 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
BROWN, RITA
45 WILLOW RUN
DEFUNIAK SPRINGS FL 32435 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
LOUWERENS, MARILYN
1660 BALWIN AVE.
DEFUNIAK SPRINGS FL 32435 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
RAY, BRENDA
262 CIRCLE DR
DEFUNIAK SPRINGS FL 32435 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
MCDONALD, JEANETTE A
341 SOUTH 20TH
DEFUNIAK SPRINGS FL 32435 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
LITTLE, REACY
298 PARK AVE.
DEFUNIAK SPRINGS FL 32435 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
Sonny Yates
179 South 1st St
Defuniak Springs, FL 32435 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
SD
Rita Brown
Circle Drive
Defuniak Springs, FL 32435 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
marilyn Louwerens
1660 Balwin Ave
Defuniak Springs, FL 32435 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
Jeanne Laird
2194 Co Hwy 183B
Defuniak Springs FL 32433 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
Jeannette A McDonald
341 S. 20th St
Defuniak Springs, FL 32435 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
Reacy Little
298 Park Ave
Defuniak Springs, FL 32435 ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Sonny Yates