


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90269 019 ****61.25

DOCUMENT # N29395 1. Entity Name ST. LUCIE HISTORICAL SOCIETY, INC.					
Principal Place of Business 414 SEAWAY DRIVE FORT PIERCE, FL 34949			Mailing Address PO BOX 578 FT PIERCE, FL 34954-0578 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		03172005 Chg-NP CR2E037 (10/03)	
Zip		Country		4. FEI Number 59-1723166	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HAMILL, ALLARDYCE A. 1702 ARIZONA AVE FORT PIERCE, FL 34982-5730				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ (NOTE: Registered Agent signature required when reinstating) <small>Signature, typed or printed name of registered agent and title if applicable. DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FOREMAN, PAT <input checked="" type="checkbox"/> Delete 1324 ELYTON CT. PORT SAINT LUCIE, FL 34952	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input type="checkbox"/> Delete CROGHAN, CHARLES 2025 JACARANDA DRIVE FORT PIERCE, FL 34949	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input type="checkbox"/> Delete MONCHEM, MAGGIE 2579 SOUTH US 1 FORT PIERCE, FL 34982	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <input type="checkbox"/> Delete ALLARDYCE HAMILL, ALLARDYCE 1702 ARIZONA AVE FORT PIERCE, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete MONAHAN, ROSALIND 1609 EDGEVALE ROAD FORT PIERCE, FL 34982	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete HOLTSBERG, HAROLD 805 SO. INDIAN RIVER DRIVE FORT PIERCE, FL 34950	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <i>Allyce A Hamill</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: 4/11/05 <small>Daytime Phone #</small>		

ATTACHMENT
#N29395

40059232

59-1723166

11.

P/D

Culverhouse, Brad
505 Beach Court
Ft. Pierce, Fl. 34950

D

Dawson, Dennis
160 11th Ave.
Vero Beach, Fl 32962

S/D

Cook, Wendell
1761 S.W. Tivan Lane
Port St. Lucie, Fl 34984

D

Bennett, Nancy
4805 Eagle Dr.
Ft. Pierce, Fl. 34951

S/D

Minchew, Maggie
2579 South US 1
Ft. Pierce, Fl 34982

T/D

Hamill, Allardyce
1702 Arizona Ave.
Ft. Pierce, Fl. 34982

D

Bussey, Lorena J.
8593 Lonesome Pine Trail
Ft. Pierce, Fl 34945

D

Gladwin, Kathy
986 S. Jenkins Rd.
Ft. Pierce, Fl 34947

D

Hooper, Kitty
864 S.E. Degan Dr.
Port St. Lucie, Fl 34983

D

Macomber, James
451 Waters Dr.
Ft. Pierce, Fl. 34946

D

Simone, Michael
407 N. 6th Street
Ft. Pierce, Fl 34950