

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33181

FILED
Jul 22, 2004
Secretary of State

Entity Name: APALACHICOLA MARITIME MUSEUM, INC.

Current Principal Place of Business:

268 WATER STREET
P.O. BOX 625
APALACHICOLA, FL 323207625 US

New Principal Place of Business:

P.O. BOX 625
APALACHICOLA, FL 323207625 US

Current Mailing Address:

268 WATER STREET
P.O. BOX 625
APALACHICOLA, FL 323207625 US

New Mailing Address:

P.O. BOX 625
APALACHICOLA, FL 323207625 US

FEI Number: 59-2957145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARLICK, DANIEL W
48 AVE D
APALACHICOLA, FL 32320 US

Name and Address of New Registered Agent:

CONRAD, EDWARD G PRES.
93 22ND AVE
APALACHICOLA, FL 32320 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: EDWARD G. CONRAD

07/22/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GARLICK, DANIEL W
Address: P O BOX 385
City-St-Zip: APALACHICOLA, FL 32329

Title: D () Delete
Name: HALL, JEROME R
Address: 52TH ST.
City-St-Zip: APALACHICOLA, FL 32320

Title: D () Delete
Name: ADKINS, GORDON
Address: P O BOX 280
City-St-Zip: APALACHICOLA, FL 32329

Title: T () Delete
Name: ZINGARELLI, KIMBERLY
Address: P O BOX 1092
City-St-Zip: APALACHICOLA, FL 32329

Title: D () Delete
Name: ARNOLD, HARRY
Address: P O BOX 9
City-St-Zip: APALACHICOLA, FL 32329

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GARLICK, DANIEL W
Address: P O BOX 385
City-St-Zip: APALACHICOLA, FL 32329

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

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

Title: T (X) Change () Addition
Name: AMBOS, DIETER
Address: 24 AMBOS LANE
City-St-Zip: APALACHICOLA, FL 32329

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

Title: P () Change (X) Addition
Name: CONRAD, EDWARD G
Address: P O BOX 578
City-St-Zip: APALACHICOLA, FL 32329

I hereby certify that the information supplied with this filing does not qualify for the 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 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: EDWARD G. CONRAD

P

07/22/2004

Electronic Signature of Signing Officer or Director

Date