

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34509

FILED
Apr 21, 2006
Secretary of State

Entity Name: HISTORICAL SOCIETY OF FORT MEADE, FLORIDA, INC.

Current Principal Place of Business:

1 TECUMSEH AVENUE
FORT MEADE, FL 33841

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1021
FORT MEADE, FL 33841

New Mailing Address:

FEI Number: 59-2997776

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WRIGHT, LETA
110 N.E. 3RD STREET
FT. MEADE,, FL 33841 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: DP () Delete
Name: WRIGHT, LETA
Address: 110 N.E. 3RD STREET
City-St-Zip: FORT MEADE, FL 33841

Title: DVP () Delete
Name: LANGSTON, PEGGY
Address: 2555 GABRIEL ROAD
City-St-Zip: FT. MEADE, FL 33841

Title: DT () Delete
Name: STHRESHLEY, III, LAWRENCE F
Address: 311 N.E. 1ST STREET
City-St-Zip: FORT MEADE, FL 33841

Title: DS () Delete
Name: STHRESHLEY, LAURETTA C
Address: 311 N.E. 1ST STREET
City-St-Zip: FORT MEADE, FL 33841

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WRIGHT, LETA
Address: 110 N.E. 3RD STREET
City-St-Zip: FORT MEADE, FL 33841

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

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

Title: DP (X) Change () Addition
Name: STHRESHLEY, LAURETTA C
Address: 311 N.E. 1ST STREET
City-St-Zip: FORT MEADE, FL 33841

I hereby certify that the information supplied with this filing does not qualify for the 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: LAWRENCE F. STHRESHLEY, III

DT

04/21/2006

Electronic Signature of Signing Officer or Director

Date