

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35130

FILED
Jul 07, 2005
Secretary of State

Entity Name: SANFORD HISTORIC TRUST, INC.

Current Principal Place of Business:

P.O. BOX 536
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 536
SANFORD, FL 32771

New Mailing Address:

FEI Number: 59-2978621 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KUHN, LINDA
313 PALMETTO AVENUE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

MCLEOD, CHRISTOPHER
411 MAGNOLIA AVE
SANFORD, FL 32771 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: CHRISTOPHER T MCLEOD

07/07/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: SHREVE, MARIA
Address: 1118 PALMETTO AVE
City-St-Zip: SANFORD, FL 32771

Title: S () Delete
Name: GIBBS, DENNY
Address: 517 MYRTLE AVE
City-St-Zip: SANFORD, FL 32771

Title: T () Delete
Name: MCLEOD, CHRIS
Address: 411 MAGNOLIA AVE
City-St-Zip: SANFORD, FL 32771

Title: BM () Delete
Name: LOOSE, FRANK
Address: 1015 MAGNOLIA AVE
City-St-Zip: SANFORD, FL 32771

Title: BM () Delete
Name: LLOYD, PHYLLIS
Address: 420 OAK STREET
City-St-Zip: SANFORD, FL 32771

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: KINNEY, ROBERT
Address: 1920 PARK AVE
City-St-Zip: SANFORD, FL 32771

Title: S (X) Change () Addition
Name: LOOSE, FRANK
Address: 1015 MAGNOLIA AVE
City-St-Zip: SANFORD, FL 32771

Title: T (X) Change () Addition
Name: LLOYD, PHYLLIS
Address: 420 OAK STREET
City-St-Zip: SANFORD, FL 32771

Title: BM (X) Change () Addition
Name: CHUMIR, STEVE
Address: 823 PARK AVE
City-St-Zip: SANFORD, FL 32771

Title: BM (X) Change () Addition
Name: SISCO, VALERIE
Address: 504 MYRTLE AVE
City-St-Zip: SANFORD, FL 32771

Title: BM () Change (X) Addition
Name: DIECKHAUS, HANK
Address: PALMETTO
City-St-Zip: SANFORD, FL 32771

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: CHRISTOPHER T MCLEOD

PRES

07/07/2005

Electronic Signature of Signing Officer or Director

Date