

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Mar 14, 2005  
Secretary of State

DOCUMENT# N41331

Entity Name: CENTER FOR HISTORICAL ARCHAEOLOGY, INC.

**Current Principal Place of Business:**

190 VERSAILLES DR  
STE C  
MELBOURNE BEACH, FL 32951 US

**New Principal Place of Business:**

285 PROVINCIAL DRIVE  
INDIALANTIC, FL 32903 US

**Current Mailing Address:**

190 VERSAILLES DR  
STE C  
MELBOURNE BEACH, FL 32951 US

**New Mailing Address:**

285 PROVINCIAL DRIVE  
INDIALANTIC, FL 32903 US

FEI Number: 59-3054027

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

DE BRY, JOHN  
190 VERSAILLES DR  
STE C  
MELBOURNE BEACH, FL 32951 US

**Name and Address of New Registered Agent:**

DE BRY, JOHN  
285 PROVINCIAL DRIVE  
INDIALANTIC, FL 32903 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: JOHN DE BRY

03/14/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: DE BRY, JOHN,  
Address: 790 VERSAILLES DR- STE C  
City-St-Zip: MELBOURNE BEACH, FL

Title: D ( ) Delete  
Name: DE BRY, NANCY,  
Address: 3220 RIVER VILLA WAY  
City-St-Zip: MELBOURNE BEACH, FL

Title: D ( ) Delete  
Name: SIEGEL, JERRY L  
Address: 117 E 62 ST  
City-St-Zip: NEW YORK, NY

Title: D ( ) Delete  
Name: CRONE, STEPHANIE L  
Address: 13371 GLACIER NATIONAL DRIVE - APT. 105  
City-St-Zip: ORLANDO, FL 32837

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: DE BRY, JOHN,  
Address: 285 PROVINCIAL DRIVE  
City-St-Zip: INDIALANTIC, FL 32903

Title: D (X) Change ( ) Addition  
Name: DE BRY, NANCY,  
Address: 285 PROVINCIAL DRIVE  
City-St-Zip: INDIALANTIC, FL 32903

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

Title: D (X) Change ( ) Addition  
Name: CRONE, STEPHANIE L  
Address: 1113 LAKE BISCAYNE WAY  
City-St-Zip: ORLANDO, FL 32824

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: JOHN DE BRY

DP

03/14/2005

Electronic Signature of Signing Officer or Director

Date