

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41331

FILED
Mar 13, 2009
Secretary of State

Entity Name: CENTER FOR HISTORICAL ARCHAEOLOGY, INC.

Current Principal Place of Business:

285 PROVINCIAL DRIVE
INDIALANTIC, FL 32903 US

New Principal Place of Business:

Current Mailing Address:

285 PROVINCIAL DRIVE
INDIALANTIC, FL 32903 US

New Mailing Address:

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
285 PROVINCIAL DRIVE
INDIALANTIC, FL 32903 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: DE BRY, JOHN,
Address: 285 PROVINCIAL DRIVE
City-St-Zip: INDIALANTIC, FL 32903

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

Title: D () Delete
Name: HEDRICK, LAYNE L
Address: 12312 THOMPkins DRIVE
City-St-Zip: AUSTIN, TX 78753

Title: D () Delete
Name: CRONE, STEPHANIE L
Address: 440 DEER POINTE CIRCLE
City-St-Zip: CASSELLBERRY, FL 32707

Title: D () Delete
Name: FUNK, THOMAS
Address: 360 INDIAN MOUND DRIVE
City-St-Zip: MELBOURNE BEACH, FL 32951

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 US

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

Title: D (X) Change () Addition
Name: HEDRICK, LAYNE L
Address: 12312 THOMPkins DRIVE
City-St-Zip: AUSTIN, TX 78753 US

Title: D (X) Change () Addition
Name: CRONE, STEPHANIE L
Address: 440 DEER POINTE CIRCLE
City-St-Zip: CASSELLBERRY, FL 32707 US

Title: D (X) Change () Addition
Name: FUNK, THOMAS
Address: 360 INDIAN MOUND DRIVE
City-St-Zip: MELBOURNE BEACH, FL 32951 US

I hereby certify that the information supplied with this filing does not qualify 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: JOHN DE BRY

DP

03/13/2009

Electronic Signature of Signing Officer or Director

Date