2002 UNIFORM BUSINESS REPORT (UBR)

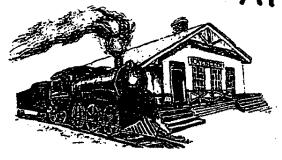
Mar 05, 2002 8:00 am **DOCUMENT # N42707 Secretary of State** 1. Entity Name KATHLEEN AREA HISTORICAL SOCIETY, INC. 03-05-2002 90063 032 ****70.00 Principal Place of Business Mailing Address P.O.BOX 977 P.O.BOX 977 KATHLEEN FL 33849-0977 KATHLEEN FL 33849-0977 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-3050670 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) WILLIAMS, BETTY A 6215 CHEATWOOD DR **PO BOX 172** City Zip Code KATHLEEN FL 33849 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. **Department of State** Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. D (ONLY) Change ☐ Delete Addition TITLE TITLE 6) WILLIAMS, BETTY A NAME NAME 6215 CHEATWOOD DR PO BOX 172 STREET ADDRESS STREET ADDRESS KATHLEEN FL 33849-0172 CITY-ST-ZIP CITY-ST-ZIE ☐ Addition TITLE ☐ Delete TITLE Change TAUGH, GAIL NAME NAME 7503 WILLOW WISP DR. W. STREET ADDRESS STREET ADDRESS LAKELAND FL 33810 CITY-ST-7IP CITY-ST-ZIP Change TITLE Delete TITLE Addition ROBAK, LILLIE M ----NAME NAME -217 NORTH GALLOWAY ROAD STREET ADDRESS STREET ADDRESS LAKELAND FL 33815 CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITI F MAYHEW, BONNIE NAME NAME 2363 SEA ISLAND CIRCLE SOUTH STREET ADDRESS STREET ADDRESS LAKELAND FL 33810 CITY-ST-ZIP CITY-ST-ZIP Addition Delete TITLE Change TITLE THOMAS, WILTON BRYAN ELLEN TRENE 39255.B. MERRION ROAD NAME NAME 1920 CHRISTY LANE STREET ADDRESS STREET ADORESS LAKELAND FL 33813 CITY-ST-ZIP CITY-ST-ZIP AKELAND, FL 33810 Addition Delete ☐ Change TITLE TITLE **HUTTON, DOUGLAS** CASE CHERYL 5840 Ross Creek ROAD NAME NAME 3720 KATHLEEN PINES P.O. BOX 8 STREET ADDRESS STREET ADDRESS KATHLEEN FL 33849 CITY-ST-ZIP CITY-ST-ZIP

changed, or on an attachment with an address, with all other REASURER 2/15/02 (863)688

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if

LAKELAND

Attachment #N42707



Kathleen Area Historical Society

P.O. Box 977

Kathleen, FL. 33849-0977

Phone: (941) 859-3347

Fax: (941) 859-2317

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RE: 2002 UNIFORM BUSINESS REPORT CONTINUATION OF OFFICERS

DV BARE, THERESA 2317 DUFF ROAD LAKELAND, FL 33810

BROOKS, DORIS 125 W. SOCRUM LOOP ROAD LAKELAND, FL 33809

D GLISSON, DORIS 6816 CATHERINE RD., P.O. BOX 254 KATHLEEN, FL 33849