

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43958

FILED
Apr 27, 2011
Secretary of State

Entity Name: THE GLADES HISTORICAL SOCIETY, INC.

Current Principal Place of Business:

1908 SE AVE K PLACE
BELLE GLADE, FL 33430 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1662
BELLE GLADE, FL 33430 US

New Mailing Address:

FEI Number: 59-1690097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEEKS, JEFFREY S
1908 SE AVE K PLACE
BELLE GLADE, FL 33430 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: PD
Name: WEEKS, JEFFREY S
Address: 1908 SE AVE K PLACE
City-St-Zip: BELLE GLADE, FL 33430

Title: TD
Name: SWAGER, GLORIA
Address: 301 S.E. 7TH STREET NORTH
City-St-Zip: BELLE GLADE, FL 33430

Title: D
Name: STEIN, STEWART
Address: 1625 WEDGWORTH ROAD
City-St-Zip: BELLE GLADE, FL 33430

Title: D
Name: LUTZ, KENNTH E
Address: 301 NW AVE C
City-St-Zip: BELLE GLADE, FL 33430

Title: D
Name: MARTIN, JAMES
Address: 133 SE 5TH ST N
City-St-Zip: BELLE GLADE, FL 33430

Title: D
Name: THOMPSON, CURTIS A
Address: 1040 SE 3RD STREET
City-St-Zip: BELLE GLADE, FL 33430

I hereby 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 all other like empowered.

SIGNATURE: JEFFREY WEEKS

P

04/27/2011

Electronic Signature of Signing Officer or Director

Date