

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N44339

1. Entity Name

KISSIMMEE VALLEY ARCHAEOLOGICAL AND HISTORICAL CONSERVANCY, INC.

Principal Place of Business

195 HUNTLEY OAKS BLVD  
LAKE PLACID FL 33852  
US

Mailing Address

195 HUNTLEY OAKS BLVD  
LAKE PLACID FL 33852  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3079316

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FITCH, JIM  
13300 US 98  
SEBRING FL 33870

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME REYNOLDS, ANNE ☐ Delete  
STREET ADDRESS 80 BEAR POINT  
CITY-ST-ZIP LAKE PLACID FL 33852

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VD  
NAME WILDE, CHARLES ☐ Delete  
STREET ADDRESS 195 HUNTLEY OAKS  
CITY-ST-ZIP LAKE PLACID FL

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD  
NAME WILDE, JANE ☐ Delete  
STREET ADDRESS 195 HUNTLEY OAKS BLVD  
CITY-ST-ZIP LAKE PLACID FL 33852

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D  
NAME CHRISTIANSEN, A F ☒ Delete  
STREET ADDRESS 1026 16TH AVE  
CITY-ST-ZIP SEBRING FL 3872

TITLE  
NAME ROD PHELPS ☒ Change ☐ Addition  
STREET ADDRESS 274 AUGUSTA WAY  
CITY-ST-ZIP LAKE PLACID, FL 33852

TITLE SD  
NAME DUNCAN, CAROLINE ☐ Delete  
STREET ADDRESS 1707 DIVOT LANE  
CITY-ST-ZIP SEBRING FL 33872

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JANE WILDE  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/26/02

FILED  
May 14, 2002 8:00 am  
Secretary of State

05-14-2002 90062 027 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)