

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N44941

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA CONFEDERATION FOR THE PRESERVATION OF HISTORIC SITES, INC.

**Current Principal Place of Business:**

C/O HEWITT J. DUPONT  
1515 HERBERT ST, STE 213  
PORT ORANGE, FL 321296105

**New Principal Place of Business:**

**Current Mailing Address:**

C/O HEWITT J. DUPONT  
1515 HERBERT ST, STE 213  
PORT ORANGE, FL 321296105

**New Mailing Address:**

**FEI Number:** 59-3092341

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DUPONT, HEWITT J.  
1515 HERBERT ST  
STE 213  
PORT ORANGE, FL 32129 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: DS  
Name: BLAIR, THOMAS W JR.  
Address: 2545 GARDENIA RD.  
City-St-Zip: DELAND, FL 32724161B

Title: DT  
Name: JONES, DINAH S  
Address: 292 FIR ST  
City-St-Zip: ORMOND BEACH, FL 32174

Title: DV  
Name: SMITH, CHARLES  
Address: PO BOX 9844  
City-St-Zip: DAYTONA BEACH, FL 32120

Title: DV  
Name: JONES, RICHARD E  
Address: 292 FIR STREET  
City-St-Zip: ORMOND BEACH, FL 32174

Title: DP  
Name: MANN, ROBERT W  
Address: PO BOX 9877  
City-St-Zip: DAYTONA BEACH, FL 32120

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: RICHARD E JONES

DV

04/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date