2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Sep 06, 2007 8:00 am
Secretary of State
09-06-2007 90010 004 ****61.25

DOCUMENT # N50511

1. Entity Name

FLAGLER MODEL RAILROAD CLUB AND MUSEUM INC.

Principal Place of Business	Mailing Address
612 N. STATE ST. BUNNELL FL 32110 US	P.O. BOX 1011 BUNNELL FL 32110 US

2nd MOORE CR2E037 (4/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
FLAGLER BEACH LIBRARY	P.O. BOX 1011
Suite, Apt. #, etc.: 315 S. 7TH ST	Suite, Apt. #, etc.
City & State: FLAGLER BEACH FL	City & State: BUNNELL FL
Zip: 32136 Country: ~~USA~~ ~~FLAGLER~~	Zip: 32110 Country: USA

4. FEI Number: 59-3149196 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MAHLER, ARCHIE P
1710 N. CENTRAL AVE.
FLAGLER BEACH FL 32136

7. Name and Address of New Registered Agent

Name: SAME

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ 8-25-2007
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
Due By September 5, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLS, FRANK PO BOX 353856 PALM COAST FL 32135	☐ Delete	D MC PARTLAND EDDY 690 ALEIDA DR ST. AUGUSTINE FL 32086	☑ ~~Change~~ ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/S BISSINGER, JOHN A III 150 BEAR FOOT TRAIL ORMOND BEACH FL 32174	☑ Delete	S MATHIS BOB 5068 ROCKAWAY, CLARKSTON, MI 48348	☑ ~~Change~~ ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARDEN, RICHARD 103 B SELUNA TRAIL PALM COAST FL 32164	☑ Delete	D MARTINO KEITH W.170 S8028 GREEN ST MUSKEGO, WI 53348	☑ ~~Change~~ ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BAUMANN, WALTER 7 LOCHWIND LANE ORMOND BEACH FL 32174	☐ Delete	T MAHLER ARCHIE R 1710 N. CENTRAL AVE FLAGLER BEACH FL 32136	☑ ~~Change~~ ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MAHLER, ARCHIE R 1710 N. CENTRAL AVE FLAGLER BEACH FL 32136	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MCPARTLAND, EDWARD 690 ALEIDA DR SAINT AUGUSTINE FL 32086	☑ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ ARCHIE R MAHLER P 386-439-1366