

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001490

FILED
Apr 26, 2011
Secretary of State

Entity Name: UNION COUNTY HISTORICAL SOCIETY, INC.

Current Principal Place of Business:

410 W MAIN ST
STE C
LAKE BUTLER, FL 32054

New Principal Place of Business:

Current Mailing Address:

410 W MAIN ST
STE C
LAKE BUTLER, FL 32054

New Mailing Address:

FEI Number: 59-3163681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUMPH, BARBARA B
8247 S W 115 TH. RUN
LAKE BUTLER, FL 32054 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: P
Name: NORTH, CINDY
Address: 290 NE FIRST AVE.
City-St-Zip: LAKE BUTLER, FL 32054

Title: 1VP
Name: MCGILL, BILL
Address: 275 S LAKE AV.E
City-St-Zip: LAKE BUTLER, FL 32054

Title: TS
Name: RUMPH, BARBARA
Address: 8247 SW 115TH RUN
City-St-Zip: LAKE BUTLER, FL 32054

Title: D
Name: DRIGGERS, MARJORIE,
Address: 250 NW 3RD STREET
City-St-Zip: LAKE BUTLER, FL 32054

Title: D
Name: BEARDEN, JOAN
Address: 10010 SW 52 ROAD
City-St-Zip: GAINESVILLE, FL 32608

Title: D
Name: RIVERS, WILSON
Address: PO BOX 806
City-St-Zip: LAKE BUTLER, FL 32054

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: BARBARA B. RUMPH

TREA

04/26/2011

Electronic Signature of Signing Officer or Director

Date