

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 21, 2007 8:00 am**  
**Secretary of State**

03-21-2007 90045 037 \*\*\*\*61.25

<b>DOCUMENT # N93000002299</b> 1. Entity Name FLORIDA GARDEN RAILWAY SOCIETY, INC.					
Principal Place of Business 5620 CRESTHILL DRIVE TAMPA, FL 33615 US			Mailing Address 5620 CRESTHILL DRIVE TAMPA, FL 33615 US		
2. Principal Place of Business - No P.O. Box # 237B ANTHONY AVE		3. Mailing Address 237B ANTHONY AVE			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State CLEARWATER, FL		City & State CLEARWATER, FL			
Zip 33759	Country USA	Zip 33759	Country USA	4. FEI Number 59-3219548	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent HERTENSTEIN, CARL W 5620 CRESTHILL DRIVE TAMPA, FL 33615				7. Name and Address of New Registered Agent Name LES R SMOUT Street Address (P.O. Box Number is Not Acceptable) 237B ANTHONY AVE City CLEARWATER FL Zip Code 33759	
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  LES R SMOUT, TREASURER 2-3-07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HARTES, PETER 1124 SHADOW RUN DRIVE LAKELAND, FL 33813	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HERTENSTEIN, CARL W 5620 CRESTHILL DRIVE TAMPA, FL 33615	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LES R SMOUT 237B ANTHONY AVE CLEARWATER, FL 33759 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHELDON, GEORGE 611 RED SAIL LANE ALTAMONTE, FL 32701	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KIMMEL, FRANK 15608 BAY VISTA DRIVE CLERMONT, FL 34711	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOTAS, STAN 608 VALLE VISTA DRIVE BRANDON, FL 33511	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEGAL, RICHARD 17340 STEPPING STONE DRIVE FT MYERS, FL 33912	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRANK SCHLEE 2000 FOREST NELSON BLVD, A-4 PORT CHARLOTTE, FL 33952 <input type="checkbox"/> Change <input checked="" type="checkbox"/> 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.					
<b>SIGNATURE:</b> GEORGE S. SHELDON, SECRETARY 2/3/07 (907)331-6554 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					