

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004880

FILED
Apr 26, 2006
Secretary of State

Entity Name: LAKE ALFRED HISTORICAL SOCIETY, INC.

Current Principal Place of Business:

210 SEMINOLE AVENUE
LAKE ALFRED, FL 33850

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 86
LAKE ALFRED, FL 33850

New Mailing Address:

FEI Number: 59-3287158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEVITO, SAM JR.
280 E. ECHO STREET
LAKE ALFRED, FL 33850 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 () Delete
Name: DEVITO, SAM JR.
Address: 280 E. ECHO STR.
City-St-Zip: LAKE ALFRED, FL 33850

Title: TS () Delete
Name: BALDWIN, JANET
Address: P.O. BOX 728
City-St-Zip: LAKE ALFRED, FL 33850

Title: VP () Delete
Name: THOMAS, ORRIN
Address: P.O. BOX 1113
City-St-Zip: LAKE ALFRED, FL 33850

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JANET S. BALDWIN

TREA

04/26/2006

Electronic Signature of Signing Officer or Director

Date