

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000844

FILED
Feb 06, 2009
Secretary of State

Entity Name: ORTEGA PRESERVATION SOCIETY, INC.

Current Principal Place of Business:

2822 CHEROKEE AVENUE
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 46
ORTEGA STATION
JACKSONVILLE, FL 32210

New Mailing Address:

2822 CHEROKEE AVENUE
JACKSONVILLE, FL 32210

FEI Number: 59-3307232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDIN, RICHARD D
2822 CHEROKEE AVE.
JACKSONVILLE, FL 32210 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: DP () Delete
Name: HARDIN, RICHARD D
Address: 2822 CHEROKEE AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

Title: DS () Delete
Name: HOLIFIELD, LEE
Address: 4157 TIMUGUANA RD
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: CHISHOLM, CAL
Address: 4252 BALTIC CIRCLE
City-St-Zip: JACKSONVILLE, FL 32210

Title: DT () Delete
Name: HARDIN, CHERYL
Address: 2822 CHEROKEE AVENUE
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: HOLIFIELD, MIKE
Address: 4157 TIMUGUANA RD
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: CHISHOLM, GAIL
Address: 4252 BALTIC CIRCLE
City-St-Zip: JACKSONVILLE, FL 32210

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 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: RICHARD D. HARDIN

DP

02/06/2009

Electronic Signature of Signing Officer or Director

Date