


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2008 8:00 am
Secretary of State

07-28-2008 90033 017 ****61.25

DOCUMENT # N95000003279 1. Entity Name PENSACOLA NUMISMATIC SOCIETY, INC.					
Principal Place of Business EMERALD CRT COINS 7141 A N. 9TH AVE PENSACOLA, FL 32504				Mailing Address PO BOX 3031 PENSACOLA, FL 32516	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		05132008 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 59-3335133	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
ROSENBLEETH, ARNOLD 470 HIWAY 29 SOUTH CANTONMENT, FL 32533				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;">FL</div> <div style="text-align: right;">Zip Code</div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	PD NUTT, ARTHUR 9654 QUAIL HOLLOW BLVD PENSACOLA, FL 32514	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Randy Wright Box 365 Pensacola, FL 32591	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LANE, EDWARD J 555 SELINA ST PENSACOLA, FL 32503	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Bud Cooley 921 S. Madison Dr Pensacola, FL 32505	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROSENBLEETH, ARNOLD 470 HIGHWAY 29 SOUTH CANTONMENT, FL 32533	<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	SD O'QUINN, PATRICK 628 WOODBINE DR PENSACOLA, FL 32503	<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	D GARLACH, STEVE 7181 A N 9TH AVE PENSACOLA, FL 32504	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Steve GERLACH 7141 A N 9th Ave Pensacola, FL 32504	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input 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.					
SIGNATURE: <u>Edward J. Lane</u> EDWARD J. LANE Treasurer 7-22-08 (250) 572-1208 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					