

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003804

FILED  
Mar 12, 2008  
Secretary of State

**Entity Name:** THE MUSEUM OF MAN IN THE SEA, INCORPORATED

**Current Principal Place of Business:**

17314 PANAMA CITY BEACH PKWY  
PANAMA CITY BEACH, FL 324132020 US

**New Principal Place of Business:**

17314 PANAMA CITY BEACH PKWY  
PANAMA CITY BEACH, FL 324136038 US

**Current Mailing Address:**

17314 PANAMA CITY BEACH PKWY  
PANAMA CITY BEACH, FL 324132020 US

**New Mailing Address:**

17314 PANAMA CITY BEACH PKWY  
PANAMA CITY BEACH, FL 324136038 US

**FEI Number:** 59-3329272

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARDY, RONALD  
17314 PANAMA CITY BEACH PARKWAY  
PANAMA CITY BEACH, FL 32413 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: BRUHMULLER, WILLIAM  
Address: 2159 BRIARWOOD CIRCLE  
City-St-Zip: PANAMA CITY, FL 32405 US

Title: V ( ) Delete  
Name: QUIRK, JOHN  
Address: 812 MOORE CIRCLE  
City-St-Zip: PANAMA CITY, FL 32401 US

Title: S ( ) Delete  
Name: DAVIS, BONNIE  
Address: 171 DOLPHIN COVE  
City-St-Zip: FREEPORT, FL 32439 US

Title: T ( ) Delete  
Name: THOMAS, ANTHONY  
Address: 6719 BROWARD ST.  
City-St-Zip: PANAMA CITY BEACH, FL 32408 US

Title: D ( ) Delete  
Name: BARTH, ROBERT  
Address: 4143 HARLAN SHOPE ROAD  
City-St-Zip: PANAMA CITY, FL 32404 US

Title: D ( ) Delete  
Name: HAZELBAKER, JON  
Address: 11520 ISLE OF PALMS DRIVE  
City-St-Zip: FT. MEYERS BEACH, FL 33931 US

**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:

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 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: WILLIAM BRUHMULLER

P

03/12/2008

Electronic Signature of Signing Officer or Director

Date