

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2002 8:00 am
Secretary of State

09-08-2002 90091 047 ****61.25

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1. Entity Name

OCEAN REEF HISTORICAL SOCIETY, INC.

Principal Place of Business

Mailing Address

200 ANCHOR DR
 KEY LARGO FL 33037
 US

24 DOCKSIDE LANE
 PMB 450
 KEY LARGO FL 33037
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0900807

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DAVIDSON, T.N.
 07 SUNRISE CAY DRIVE
 NORTH KEY LARGO FL 33037

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**After September 13, 2002,
 min. will be \$236.25.**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
 NAME CD
 STREET ADDRESS DAVIDSON, TOM N
 CITY-ST-ZIP 07 SUNRISE CAY DRIVE
 NORTH KEY LARGO FL 33037

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **DAVIDSON, TOM N**
 CITY-ST-ZIP **07 SUNRISE CAY DRIVE
 NORTH KEY LARGO FL 33037**

TITLE ☒ Delete
 NAME SD
 STREET ADDRESS ARONOFF, GEORGE N
 CITY-ST-ZIP 03 BAY RIDGE ROAD
 NORTH KEY LARGO FL 33037

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **Richard Skelly**
 CITY-ST-ZIP **17 Bay Ridge Rd
 Key Largo, FL 33037**

TITLE ☐ Delete
 NAME D
 STREET ADDRESS POST, RUSSELL A
 CITY-ST-ZIP 24 DISPATCH CREEK COURT
 NORTH KEY LARGO FL 33037

TITLE ☐ Change ☒ Addition
 NAME **D**
 STREET ADDRESS **Shirley Shumway**
 CITY-ST-ZIP **58 Tarpon Lane
 Key Largo FL 33037**

TITLE ☐ Delete
 NAME D
 STREET ADDRESS GOLDSTEIN, ALAN
 CITY-ST-ZIP 5 CANNON POINT
 NORTH KEY LARGO FL 33037

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME D
 STREET ADDRESS HACKELTON, WILLIAM B
 CITY-ST-ZIP 285 S HARBOR DR
 N KEY LARGO FL 33037

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Delete
 NAME D
 STREET ADDRESS BRINCKERHOFF, TODD
 CITY-ST-ZIP 08 GRAYVILK DRIVE
 KEY LARGO FL 33037

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/26/02 367-7839

CR2E037 (4/02)