2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 23, 2009
Secretary of State

DOCUMENT# N98000001378

Entity Name: PANAMA CANAL MUSEUM, INC.

Current Principal Place of Business:

7985 113TH STREET
SUITE 100
SEMINOLE, FL 337724785 US

New Principal Place of Business:

Current Mailing Address:

7985 113TH STREET
SUITE 100
SEMINOLE, FL 337724785 US

New Mailing Address:

FEI Number: 59-3532182 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WOOD, JOSEPH
3002 SAWGRASS CIRCLE
TALLAHASSEE, FL 32308 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: D ( ) Delete
Name: HUMMER, CHARLES
Address: 4480 MAINLANDS W.
City-St-Zip: PINELLAS PARK, FL 33782

Title: D ( ) Delete
Name: WOOD, JOSEPH
Address: 3002 SAWGRASS CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D ( ) Delete
Name: EGOLF, KATHERINE G
Address: 3848 90TH TERR NO
City-St-Zip: PINELLAS PARK, FL 34666

Title: D ( ) Delete
Name: GLASSBURN, PAUL
Address: 1710 CYPRESS TRACE DRIVE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D ( ) Delete
Name: PETERSON, BARBARA
Address: 6354 SAMOA DRIVE
City-St-Zip: SARASOTA, FL 34241

Title: D ( ) Delete
Name: KEARNS, PATRICIA
Address: 100 KINGSPORT DRIVE
City-St-Zip: WILLIAMSBURG, VA 23185

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: PAUL GLASSBURN TREA 06/23/2009
Electronic Signature of Signing Officer or Director — Date