2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2012
Secretary of State

DOCUMENT# N98000001515

Entity Name: SOUTHEAST FLORIDA ARCHEOLOGICAL SOCIETY, INC.

Current Principal Place of Business:

107 SOUTH SEWALLS POINT ROAD
STUART, FL 34996

New Principal Place of Business:

Current Mailing Address:

PO BOX 2875
STUART, FL 34997

New Mailing Address:

FEI Number: 65-0854873 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MURTOUGH, LUCILLE
816 ST. LUCIE CESCENT
STUART, FL 34994 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: PD
Name: GHIOTO, WILL JR
Address: 107 S SEWALLS POINT ROAD
City-St-Zip: STUART, FL 34996

Title: TR
Name: TEUSCHER, DONNA
Address: 6061 SE MARTINIQUE DRIVE#L03
City-St-Zip: STUART, FL 34997

Title: SD
Name: TOMPKINS, DIANE
Address: 8808 SE HOBE RIDGE AVE
City-St-Zip: HOBE SOUND, FL 33455

Title: D
Name: GHIOTO, CHARLOTTE
Address: 107 S SEWELLS PT RD
City-St-Zip: STUART, FL 34996

Title: DR
Name: RIGHTS, LUCILLE
Address: 816 ST LUCIE CRESCENT
City-St-Zip: STUART, FL 34994

Title: VP
Name: PAGNUCCO, RINALDO
Address: 15474 SW MOCKINGBIRD CR
City-St-Zip: PORT SAINT LUCIE, FL 34986

I hereby 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 all other like empowered.

SIGNATURE: WILFORD GHIOTO P 04/17/2012

Electronic Signature of Signing Officer or Director — Date