## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000006118

FILED Apr 22, 2011 Secretary of State

Entity Name: SOUTH LAKE COUNTY HISTORICAL SOCIETY, INC.

Current Principal Place of Business: New Principal Place of Business:

450 E HIGHWAY 50

SUITE 1

CLERMONT, FL 34711 US

Current Mailing Address: New Mailing Address:

PO BOX 121723

CLERMONT, FL 34712 US

FEI Number: 59-3544324 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

NAGEL, MICKI 450 E HIGHWAY 50 SUITE 1

CLERMONT, FL 34711 US

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: CEO

Name: NAGEL, MICKI

Address: 450 E HIGHWAY 50, SUITE 1 City-St-Zip: CLERMONT, FL 34711 US

Title: VD

 Name:
 COLE, DEVON

 Address:
 491 E. OSCEOLA ST.

 City-St-Zip:
 CLERMONT, FL 34711 US

Title: STD

Name: WALKER, DOLORES
Address: 1653 BOWMAN ST.
City-St-Zip: CLERMONT, FL 34711 US

Title: PD

Name: GOODGAME, RAY
Address: 2118 ST. IVES CT.
Citys St. Zin: CLERMONT FL 3471

City-St-Zip: CLERMONT, FL 34711 US

Title:

Name: STOCKTON, LOUISE
Address: 478W LAKESHORE DRIVE
City-St-Zip: CLERMONT, FL 34711 US

Title: [

Name: KELLER-RABER, CANDACE Address: 863 S. WATERVIEW DR. City-St-Zip: CLERMONT, FL 34711 US

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: DOLORES WALKER ST 04/22/2011