

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001139

FILED
Apr 12, 2005
Secretary of State

Entity Name: THE HISTORICAL MCKENZIE HOUSE FOUNDATION, INC.

Current Principal Place of Business:

17 EAST THIRD COURT
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1653
PANAMA CITY, FL 32402

New Mailing Address:

FEI Number: 59-3686828

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZIMMERMAN, VIRGINIA M
1510 WILDRIDGE ROAD
LYNN HAVEN, FL 32444 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: MORTLAND, DONNA
Address: 525 N. BAY DRIVE
City-St-Zip: LYNN HAVEN, FL 32444

Title: VD () Delete
Name: ZIMMERMAN, VIRGINIA
Address: 1510 WILDRIDGE DRIVE
City-St-Zip: LYNN HAVEN, FL 32444

Title: TD () Delete
Name: GAGNET, ANDA
Address: 1323 N BAY DRIVE
City-St-Zip: LYNN HAVEN, FL 32444

Title: SD () Delete
Name: SALE, AMBER M
Address: 601 REDBIRD STREET
City-St-Zip: LYNN HAVEN, FL 32444

Title: SD () Delete
Name: BURTON, DOROTHY
Address: 6325 BIG DADDY DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32407

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: SD (X) Change () Addition
Name: SALE, AMBER M
Address: 1301 MASSACHUSETTS AVENUE
City-St-Zip: LYNN HAVEN, FL 32444

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: VIRGINIA ZIMMERMAN

VD

04/12/2005

Electronic Signature of Signing Officer or Director

Date