

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002636

FILED  
Feb 03, 2009  
Secretary of State

**Entity Name:** ZEPHYRHILLS HISTORICAL ASSOCIATION, INC.

**Current Principal Place of Business:**

39110 SOUTH AVENUE  
ZEPHYRHILLS, FL 33542

**New Principal Place of Business:**

**Current Mailing Address:**

39110 SOUTH AVENUE  
ZEPHYRHILLS, FL 33542

**New Mailing Address:**

**FEI Number:** 74-3113857

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SEPPANEN, MARGARET  
38625 CHARLES AVE  
ZEPHYRHILLS, FL 33542 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: P ( ) Delete  
Name: SEPPANEN, MARGARET  
Address: 38625 CHARLES AVE  
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: VP ( ) Delete  
Name: KUSTES, WILLIAM  
Address: 37448 BLUEBERRY CT  
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: T ( ) Delete  
Name: THOMPSON, PATRICIA  
Address: 5024 20TH ST  
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: D ( ) Delete  
Name: REYNOLDS, LEALAND  
Address: 36330 CENTURY DR  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: S ( ) Delete  
Name: MCKELL, ROSELYN  
Address: 35208 DALE AVE  
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: D ( ) Delete  
Name: TUCKER, RICHARD  
Address: 30735 SATIN LEAF LN  
City-St-Zip: ZEPHYRHILLS, FL 33543

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP (X) Change ( ) Addition  
Name: PORTER, BOB  
Address: P.O. BOX 1568  
City-St-Zip: ZEPHYRHILLS, FL 33539

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

Title: D (X) Change ( ) Addition  
Name: GEIGER, NATHAN  
Address: 7201 ASH STREET  
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: S (X) Change ( ) Addition  
Name: KUSTES, WILLIAM  
Address: 37448 BLUEBERRY CT.  
City-St-Zip: ZEPHYRHILLS, FL 33542

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: PATRICIA THOMPSON

T

02/03/2009

Electronic Signature of Signing Officer or Director

Date