2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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Street Address of Current Registered Agent 7. Name and Address of New Registered Agent TRAPP, ROBERT L 815 EAST 7TH AVENUE TALLAHASSEE, FL 32303 City City FL Zip Code 6. The above regned entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, and the resource registered agent, or both, in the State of Florida. I am familiar with, and the resource registered agent, or both, in the State of Florida. I am familiar with, and the resource registered agent, or both, in the State of Florida. I am familiar with, and t											
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STREET ADDRESS CITY-ST-ZIP LAKE City Florida 32024											
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12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes.											
indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under eath; that I am an efficer or director of the corporation or the receiver or trustee ampowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.											
SIGNATURE: Robert L. Trapp 4/14/2006 850 4/366 SIGNATURE AND TYPED ON PRINTED HAME OF EXCHANG OFFICER ON DIRECTOR DIEN DONNE POPLY	raccio										

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N9900002892 1. Entity Name NATURAL BRIDGE HISTORICAL SOCIETY, INC.											
Principal Place of Business 815 EAST 7TH AVENUE 815 EAST 7TH AVENUE TALLAHASSEE, FL 32303 TALLAHASSEE, FL 32303										mam	
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City & State			City & State			4. FEI Numbe 59-3583				plied For Applicable	
Zip	Country		Zip	Zip Cou		6. Cortificate	of Status Desired		8.75 Add se Required		
	6. Name	and Address of Current I	Registered Agent		7. Name and Address of New Registered Agent Name						
TRAPP, ROBERT L 815 EAST 7TH AVENUE TALLAHASSEE, FL 32303					Street Address (P.O. Box Number is Not Acceptable)						
					City ·	<u> </u>		FL	Zip Code	,	
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. I am familiar with, and accept the obligations of registered agent.											
ALCOUNTIES.											
SIGNATURE Signature: typod or printed name of registated agent and title if applicable (MOTE: Registated Agent signature required when reinstating) DATE											
Filing Fee is \$61.25 9. Election Campaign Financing \$5,00 May Be Added to Fees Florida Department of State											
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indicated	on this repor	t or supplemental report is:	this filing does not qualify fo true and accurate and that	or the exer	ure shall have the	same legal effect	as if made under	oath; that I ar	n 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: Robert L. Trusp 4/11/2006 850 4/3 6632											
SIGNAT		Me 1 1 -	,			1.	1	~ -	<i>a.</i> –	632	



Department of Environmental Protection

Jeb Bush Governor Marjory Stoneman Douglas Building 3900 Commonwealth Boulevard Tallahassee, Florida 32399-3000

Colleen M. Castille Secretary

August 21, 2006

Mr. Sean Toner Division of Corporations Florida Department of State 409 East Gaines Street Tallahassee, Florida 32399

Dear Mr. Toner:

This letter is to request the Corporation Reinstatement of Natural Bridge Historical Society, Inc. They are a duly authorized citizen support organization, which is under contract to provide support for the Division of Recreation and Parks in accordance with Section 258.015, F.S. Pursuant to F.S. 617.0122. This filing is exempt from any fees when certified by this department.

If further information is needed, feel free to contact Phillip Werndli at 245-3098.

Sincerely, Mike Ballock

Mike Bullock

Director

Florida Park Service

MB/jp

Attachments