



2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N99000002892 1. Entity Name NATURAL BRIDGE HISTORICAL SOCIETY, INC.						FILED 07 APR 30 PM 12:47 DEPT. OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 815 EAST 7TH AVENUE TALLAHASSEE, FL 32303				Mailing Address 815 EAST 7TH AVENUE TALLAHASSEE, FL 32303			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip		Country					
4. FEI Number 59-3583214				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				01232007 Chg-NP CR2E037 (12/06)			
6. Name and Address of Current Registered Agent TRAPP, ROBERT L 815 EAST 7TH AVENUE TALLAHASSEE, FL 32303				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____			
8. 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 SIGNATURE <u>Robert L. Trapp</u> <u>Robert L. Trapp</u> <u>1/24/07</u> <small>Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when re-stating) DATE</small>							
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD BREWER, HENRY H 2714 HADLEY FERRY ROAD CAIRO, GA 39828 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Director William G. Hord 1310 Francisco Drive Tallahassee, Florida 32304 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D WHITE, RICHARD 1526 SOUTH GADSDEN STREET TALLAHASSEE, FL 323014416 <input checked="" type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D RANDLE, TOM 201 SHELIN DRIVE TALLAHASSEE, FL 32311 <input checked="" type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	STD TRAPP, ROBERT L 815 EAST 7TH AVENUE TALLAHASSEE, FL 32303 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D BOGER, JOHN 3101 208TH STREET LAKE CITY, FL 32024 <input type="checkbox"/> Delete <u>8/24/30</u>			TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VD ROMINGER, MARK 8265 GREENMOUNT AVENUE TALLAHASSEE, FL 32317 <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
I hereby 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 indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered							
SIGNATURE: <u>Robert L. Trapp</u> <u>Robert L. Trapp</u>				<u>1/24/07</u> <u>850-413 6632</u> <small>DATE PHONE #</small>			



Florida Department of Environmental Protection

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

Charlie Crist
Governor

Jeff Kottkamp
Lt. Governor

Michael W. Sole
Secretary

April 27, 2007

Mr. Sean Toner
Division of Corporations
Florida Department of State
P.O. Box 6327
Tallahassee, Florida 32314

Dear Mr. Toner:

This letter is to certify to you that the Natural Bridge Historical Society, Inc., is 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.

After filing, please return certified documents to Eryn Calabro at the above address, MS 535. If further information is needed feel free to call her at 245-2939.

Sincerely,

Mike Bullock
Director
Florida Park Service

MB/edc

Attachments