2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 14, 2001 8:00 am DOCUMENT # N99000004558 Secretary of State 1. Entity Name 02-14-2001 90009 028 ****61.25 GENEVA HISTORICAL AND GENEALOGICAL SOCIETY. INC. Principal Place of Business Mailing Address POST OFFICE BOX 91 POST OFFICE BOX 91 GENEVA FL 32732 GENEVA FL 32732 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3594541 Not Applicable Country - ---- - _-_~ Zip - ~ - - Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) EPPERHART, MARGIE 543 HARNEY HEIGHTS ROAD GENEVA FL 32732 Zip Code FL 8. The above named entity submits this statement for the purpose of charging its registered office or registered agent, or both, in the state of Florida. SIGNATURE Signature, typed out inted name of register a agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **FILE NOW:** Make Check Payable to \$5.00 May Be Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Margie Epperhart | 543 Harney Heights Rd. Geneva FL 32732 TITLE ☐ Delete TITLE **Addition** MARTIN, MARY J NAME NAME STREET ADDRESS 1450 LK HARNEY RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GENEVA FL 32732 Sec - Recording ton Delete TITLE Addition NAME ALDERMAN, HELEN NAME 461 Allan's Nature Trail STREET ADDRESS .321 2ND ST - ----STREET ADDRESS Genera FL 32732 CITY-ST-ZIP CITY-ST-ZIP GENEVA FL 32732 TITLE Tommy Summersill 449 1st St. Delete TITLE **X** Addition Change MYERS, RON NAME STREET ADDRESS 701 OLD MIMS RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GENEVA FL 32732 Geneva FL 32732 ☐ Delete TITLE ☐ Change Addition Lee Vorhees TAYLOR, VAN NAME 678 LK Harney Rd STREET ADDRESS 3712 ROUSE RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP GENEVA FL 32732 <u>6eneva FL 32731</u> ☐ Delete TITLE ☐ Change Addition WHITING, LORRAINE NAME STREET ADDRESS **502 CEMETERY RD** STREET ADDRESS CITY-ST-ZIP GENEVA FL 32732 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME WHEELER, B F JR NAME STREET ADDRESS 6065 LAKE CHARM CIRCLE STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify 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 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.

CITY-ST-ZIP

OVIEDO FL 32765

CITY-ST-ZIP

Daytime Phone #