## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000075488

Entity Name: HISTORIC SEAPORT DISTRICT, INC.

FILED Jan 07, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

5130 OVERSEAS HWY 5130 OVERSEAS HWY

STE 2 STE 2

KEY WEST, FL 33040 KEY WEST, FL 33040 US

**Current Mailing Address: New Mailing Address:** 

5130 OVERSEAS HWY 5130 OVERSEAS HWY

STE 2 STE 2

KEY WEST, FL 33040 KEY WEST, FL 33040 US

FEI Number: 65-0836051 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SMITH, WAYNE ESQ NEVIUS, ERIN H ESQ THE SMITH LAW FIRM 302 SOUTHARD STREET 330 WHITEHEAD ST, #201 SUITE 205

KEY WEST, FL 33040 US KEY WEST, FL 33040 US

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: ERIN H. NEVIUS 01/07/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

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

Title: ( ) Delete Title: (X) Change ( ) Addition

SKOMP, A. FREDERICK ROSE, GEORGE Name: Name: 1713 JAMAICA DR 15 WHISTLING DUCK LANE Address: Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040 US

Title: D/S Title: D/VP (X) Change ( ) Addition () Delete

ROOT, TIMOTHY W Name: Name: BOWERS, R. LEE

1410 JOHNSON ST 105 CIBOLO HOLLOW NORTH Address: Address: KEY WEST, FL 33040 BOERNE, TX 78015 US City-St-Zip: City-St-Zip:

Title: Title: () Delete D/ST (X) Change ( ) Addition

SKOMP, CYNTHIA L Name: ELLER, JAMES Name: 1713 JAMAICA DR 536 COLLEGE BLVD Address: Address: City-St-Zip: KEY WEST, FL 33040 City-St-Zip: SAN ANTONIO, TX 78209 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE ROSE D/P 01/07/2008