

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S93584

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** THE HISTORICAL RESEARCH CENTER INTERNATIONAL, INC.

**Current Principal Place of Business:**

123 N. CONGRESS AVE. STE 394  
BOYNTON BEACH, FL 33426

**New Principal Place of Business:**

**Current Mailing Address:**

123 N. CONGRESS AVE. STE 394  
BOYNTON BEACH, FL 33426

**New Mailing Address:**

**FEI Number:** 65-0315964

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WALSHE, MICHAEL PRES  
123 N. CONGRESS AVE., STE 394  
BOYNTON BEACH, FL 33426 US

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

WALSHE, MICHAEL  
123 N. CONGRESS AVE., STE 394  
BOYNTON BEACH, FL 33426 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: MICHAEL WALSHE

04/20/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WALSHE, MICHAEL  
Address: 123 N. CONGRESS AVE. STE 394  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: VPSD  
Name: FISH, ESTELLE  
Address: 123 N. CONGRESS AVE. STE 394  
City-St-Zip: BOYNTON BEACH, FL 33426

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL WALSHE

P

04/20/2011

Electronic Signature of Signing Officer or Director

Date