2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748162

Entity Name: SOUTH BREVARD HISTORICAL SOCIETY, INC.

FILED Mar 17, 2019 **Secretary of State** 1866649155CC

Current Principal Place of Business:

4231 TURTLE MOUND RD. MELBOURNE, FL 32934

Current Mailing Address:

PO BOX 1064

MELBOURNE, FL 32902 US

FEI Number: 59-2017622 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JENNINGS, DONALD L 4231 TURTLE MOUND RD. MELBOURNE, FL 32934 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: DONALD L JENNINGS 03/17/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

ANDREN, CAROL L Name Name HARBAUGH, KATHRYN C 906 SOUTH RAMONA AVENUE 478 PRESTWICK CT Address Address

City-State-Zip: MELBOURNE FL 32940 INDIALANTIC FL 32903 City-State-Zip:

Title DIRECTOR Title **TREASURER**

Name GROUT, NANCY ARTHUR, BARBARA Name

Address 510 N RIVER OAKS DR Address 750 OLD FLORIDA TRAIL INDIALANTIC FL 32903 City-State-Zip: City-State-Zip: MELBOURNE BEACH FL 32951

Title DIRECTOR Title **DIRECTOR**

Name FREDRICKSON, DOLORES J Name ELLIOTT. WILEY H JR.

Address 414 S RIVERSIDE DR 3380 FLORIDA PALM AVE Address

City-State-Zip: INDIALANTIC FL 32903 MELBOURNE FL 32901 City-State-Zip:

Title **PRESIDENT** Title DIRECTOR

JENNINGS, DONALD L BARILE, DIANE D Name 4231 TURTLE MOUND RD Address Address 1809 RIVERVIEW DR

UNIT#3 City-State-Zip: MELBOURNE FL 32934

Name

City-State-Zip: MELBOURNE FL 32901

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

03/17/2019 SIGNATURE: DONALD JENNINGS **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

 Title
 DIRECTOR
 Title
 DIRECTOR

 Name
 MACMAKIN, JEFF
 Name
 POULOS, JIM

Address P.O. BOX 110365 Address 5055 PALM DRIVE

City-State-Zip: PALM BAY FL 32911 City-State-Zip: MELBOURNE BEACH FL 32951

Title DIRECTOR Title VP

NameROBERTS, NANCYNameWICKHAM, DAVIDAddress11140 S. TROPICAL TRAILAddress1770 HIGHLAND AVECity-State-Zip:MERRITT ISLAND FL 32952City-State-Zip:MELBOURNE FL 32935

TitleSECRETARYTitleDIRECTORNameCOX, JIMMYNameNEWMAN, DIANE

Address 1650 EISHENHOWER AVE Address 2638 VINING STREET

City-State-Zip: MELBOURNE FL 32901 City-State-Zip: WEST MELBOURNE FL 32904