

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768212

Entity Name: EUSTIS HISTORICAL MUSEUM, INC.**Current Principal Place of Business:**536 N. BAY STREET
EUSTIS, FL 32726**Current Mailing Address:**536 N. BAY STREET
EUSTIS, FL 32726**FEI Number:** 59-2351008**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MARSHALL, GARY I DIRECTOR
2715 BUTTERNUT CT
EUSTIS, FL 32726 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:** GARY MARSHALL

04/28/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP
Name	CHANDLER, IRENE
Address	1514 E. 1ST AVE.
City-State-Zip:	MOUNT DORA FL 32757

Title	T
Name	CARTER, ROBERT
Address	P.O. BOX 350522
City-State-Zip:	GRAND ISLAND FL 32735

Title	PRESIDENT
Name	MARSHALL, KAREN
Address	P.O. BOX 2064
City-State-Zip:	MOUNT DORA FL 32756

Title	VP
Name	COOMER, GAIL
Address	34539 MARSHALL ROAD
City-State-Zip:	EUSTIS FL 32726

Title	RECORDING SECRETARY
Name	SHUTT, PATTY
Address	2727 BAYVIEW DRIVE
City-State-Zip:	EUSTIS FL 32726

Title	DIRECTOR
Name	MARSHALL, GARY
Address	536 N. BAY STREET
City-State-Zip:	EUSTIS FL 32726

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.

SIGNATURE: GARY MARSHALL**DIRECTOR**

04/28/2022

Electronic Signature of Signing Officer/Director Detail

Date