

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000001705

**Entity Name:** OLD DOWNTOWN MELBOURNE HISTORY ASSOCIATION, INC.

**Current Principal Place of Business:**

810 E NEW HAVEN AVENUE  
MELBOURNE, FL 32901

**Current Mailing Address:**

810 E NEW HAVEN AVENUE  
MELBOURNE, FL 32901 US

**FEI Number: 74-3030820**

**Certificate of Status Desired: No**

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

BURR, JOHN  
11 SPINNAKER PT. CT.  
INDIAN HARBOUR BEACH, FL 32937 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title DP  
Name BURR, JOHN  
Address 11 SPINNAKER PT. CT  
City-State-Zip: INDIAN HARBOUR BEACH FL 32937

Title DT  
Name MARATHAS, SCOTT  
Address 611 RIO PINO N  
City-State-Zip: INDIALANTIC FL 32903

Title TREASURER  
Name KELLEY, SUSAN  
Address 77 HIGHLAND DR.  
City-State-Zip: INDIALANTIC FL 32903

Title DIRECTOR  
Name GEBHARDT, TONY  
Address 810 E NEW HAVEN AVENUE  
City-State-Zip: MELBOURNE FL 32901

*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: JOHN EDWARD BURR**

**PRES**

**01/31/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date