2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012895

Entity Name: HISTORIC SANFORD WELCOME CENTER, INC.

FILED Feb 22, 2018 Secretary of State CC9114712374

Current Principal Place of Business:

230 E. FIRST STREET SANFORD, FL 32771

Current Mailing Address:

230 E. FIRST STREET SANFORD. FL 32771 US

FEI Number: 02-0763206 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASEY, BRIAN 230 E. FIRST STREET SANFORD, FL 32771 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: BRIAN CASEY 02/22/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	VP	Title	TREASURER
Name	HOLDER, LISA	Name	MAPLES, MARILYN
Address	230 E. FIRST STREET	Address	230 E. FIRST STREET
City-State-Zip:	SANFORD FL 32771	City-State-Zip:	SANFORD FL 32771

Title DIRECTOR Title PRESIDENT

 Name
 MIKE, NALL
 Name
 DANIELS, DERRICK

 Address
 230 E. FIRST STREET
 Address
 230 E. FIRST STREET

 City-State-Zip:
 SANFORD FL 32771
 City-State-Zip:
 SANFORD FL 32771

Title DIRECTOR Title DIRECTOR

Name DEMING, WAYNE Name KIM, WATERS

Address 230 E. FIRST STREET Address 230 E. FIRST STREET

City-State-Zip: SANFORD FL 32771

City-State-Zip: SANFORD FL 32771

TitleDIRECTORTitleSECRETARYNameCROSBY, PERLANameCASEY, BRIAN

Address 230 E. FIRST STREET Address 230 E. FIRST STREET

City-State-Zip: SANFORD FL 32771

City-State-Zip: SANFORD FL 32771

Continues on page 2

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: MARILYN R MAPLES TREASURER 02/22/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR
Name GARNER, REG

Address 230 E. FIRST STREET
City-State-Zip: SANFORD FL 32771