

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1000000770

**FILED
Feb 09, 2014
Secretary of State
CC1517768671**

Entity Name: MID FLORIDA HISTORICAL RESEARCH AND RECOVERY ASSOCIATION, INC.

Current Principal Place of Business:

8348 SW 79 CIRCLE
OCALA, FL 34476

Current Mailing Address:

8348 SW 79 CIRCLE
OCALA, FL 34476 US

FEI Number: 80-0535808

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SEIDMAN, CAROL TREAS.
8348 SW 79 CIRCLE
OCALA, FL 34476 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 | VP | Title | PRESIDENT |
| Name | KIEFER, SCOTT | Name | MORGAN, KEVIN |
| Address | PO BOX 770935 | Address | 3149 SE 32 CT |
| City-State-Zip: | OCALA FL 34477 | City-State-Zip: | OCALA FL 34471 |
| | | | |
| Title | TREASURER | Title | SECY |
| Name | SEIDMAN, CAROL | Name | QUIRK, JUDITH |
| Address | 8348 SW 79 CIRCLE | Address | 5909 SW 107 STREET |
| City-State-Zip: | OCALA FL 34476 | City-State-Zip: | OCALA FL 34476 |

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: CAROL SEIDMAN

TREASDURER

02/09/2014

Electronic Signature of Signing Officer/Director Detail

Date