

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000002700

**Entity Name:** HISTORIC APALACHICOLA PLAT PRESERVATION,  
INCORPORATED

**FILED**  
**Apr 30, 2019**  
**Secretary of State**  
**6112220756CC**

**Current Principal Place of Business:**

159 AVENUE B  
APALACHICOLA, FL 32320

**Current Mailing Address:**

PO BOX 965  
APALACHICOLA, FL 32320 US

**FEI Number: 82-4763897**

**Certificate of Status Desired: No**

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

AUSLEY & MCMULLEN, P.A.  
ATTENTION: ROBERT A PIERCE, ESQ  
123 SOUTH CALHOUN STREET  
TALLAHASSEE, FL 32301 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 P  
Name DAVIS, BONNIE  
Address 159 AVENUE B  
City-State-Zip: APALACHICOLA FL 32320

Title SEC  
Name BREWER, DIANE  
Address 159 AVENUE B  
City-State-Zip: APALACHICOLA FL 32320

Title TREA  
Name GEORGE, DESPINA  
Address 159 AVENUE B  
City-State-Zip: APALACHICOLA FL 32320

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: DESPINA GEORGE**

**TREASURER**

**04/30/2019**

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

\_\_\_\_\_  
Date