

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711915

FILED
Mar 03, 2005
Secretary of State

Entity Name: THE NAVAL AVIATION MUSEUM FOUNDATION, INC.

Current Principal Place of Business:

NAVAL AIR STATION
P O BOX 33104
PENSACOLA, FL 325083104

New Principal Place of Business:

Current Mailing Address:

NAVAL AIR STATION
P O BOX 33104
PENSACOLA, FL 325083104

New Mailing Address:

FEI Number: 59-6178237

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FETTERMAN, VADM J.H.
24 LAKESIDE DR
PENSACOLA, FL 32507 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: SMITH, LEIGHTON W
Address: 17 BARON'S DRIVE
City-St-Zip: PINEHURST, NC 28374 US

Title: V () Delete
Name: WHIBBS, VINCE,
Address: 3201 NAVY BLVD
City-St-Zip: PENSACOLA, FL 32564 US

Title: S () Delete
Name: ELLIS, CHARLES E CAPT
Address: 7603 HELMS ROAD
City-St-Zip: PENSACOLA, FL 32526 US

Title: V () Delete
Name: ROGERS, E. EARLE, II,
Address: 4515 BRICKYARD BAYOU RD.
City-St-Zip: GULF BREEZE, FL 32564 US

Title: PD () Delete
Name: FETTERMAN, VADM J.H., RET
Address: 24 LAKESIDE DR
City-St-Zip: PENSACOLA, FL 32507 US

Title: TD () Delete
Name: HAYES, MORRIS L
Address: 3414 CHANTARENE DR
City-St-Zip: PENSACOLA, FL 32507 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: WHIBBS, VINCE,
Address: 5651 PENSACOLA BLVD
City-St-Zip: PENSACOLA, FL 32564 US

Title: S (X) Change () Addition
Name: ELLIS, CHARLES E CAPT
Address: 5461 HIWAY 97
City-St-Zip: WALNUT HILL, FL 32568 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MORRIS L. HAYES

TD

03/03/2005

Electronic Signature of Signing Officer or Director

Date