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95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morgan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **737028** (1)
1. Corporation Name
RETIRED ARMY JUDGE ADVOCATES ASSOCIATION, INC.

Principal Place of Business Mailing Address
**205 FLORIDA PLACE, S.E.
P.O. BOX 1628
FT. WALTON BCH FL 32548**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **10/13/1976** 3a. Date of Last Report **01/25/1994**

4. FEI Number **59-1737757** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75** Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199 (3)? Florida Statutes Yes No **X**

2. Principal Place of Business 2a. Mailing Address
21 **8 Eisenhower Place** 26 **8 Eisenhower Place**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 27
City & State 28 **Palm Coast, Florida**
23 **Palm Coast, Florida** City & State
Zip Country Zip Country
24 **2164** 25 29 **32164** 30

9. Name and Address of Current Registered Agent
**BABBITT, BRUCE C
205 FLORIDA PLACE, SE
FT WALTON BCH, FL
32548**

10. Name and Address of New Registered Agent

81 Name **Donald L. Pierce**

82 Street Address (P.O. Box Number Not Acceptable) **8 Eisenhower Place**

83 **Palm Coast**

84 City **FL** 85 Zip Code **32164**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Donald L. Pierce* STD **4/29/95**
NOTE: Registered Agent signature required after recording.

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	DOUGLASS, JOHN JAY
STREET ADDRESS	2111 DUNSTAN
CITY - ST - ZIP	HOUSTON TX
TITLE	VD
NAME	CLARKE, ROBERT B.
STREET ADDRESS	536 MCCULLUM CIRCLE
CITY - ST - ZIP	NEPTUNE BEACH FL
TITLE	STD
NAME	BABBITT, BRUCE C.
STREET ADDRESS	205 FLORIDA PLACE SE
CITY - ST - ZIP	FT. WALTON BEACH FL
TITLE	D
NAME	KOYAR, PAUL
STREET ADDRESS	411 E ERIE
CITY - ST - ZIP	MISSOURI VALLYE IA
TITLE	D
NAME	SEWELL, TOXEY H.
STREET ADDRESS	820 TURNBERRY COVE, S.
CITY - ST - ZIP	NICEVILLE FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	James A. Mundt	
13 STREET ADDRESS	4538 Valencia Circle	
14 CITY - ST - ZIP	Colorado Springs, CO 80917	
21 TITLE	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	Donald L. Pierce	
23 STREET ADDRESS	8 Eisenhower Place	
24 CITY - ST - ZIP	Palm Coast FL 32164	
31 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	Paul J. Rice	
33 STREET ADDRESS	7835 Vervain Court	
34 CITY - ST - ZIP	Springfield, Va 22152-3107	
41 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	Phillip G. Meengs	
43 STREET ADDRESS	1515 San Pablo Drive	
44 CITY - ST - ZIP	Lake San Marcos, CA 92069	
51 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	Joseph B. Conboy	
53 STREET ADDRESS	3208 57th St	
54 CITY - ST - ZIP	Lubbock, TX 79422	
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Donald L. Pierce* **4/29/95** (904) 4373848
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR