

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747973

FILED  
Apr 27, 2011  
Secretary of State

**Entity Name:** MILITARY OFFICER'S ASSOCIATION OF AMERICA, CAPE CANAVERAL CHAPTER, INC.

**Current Principal Place of Business:**

MOAA CAPE CANAVERAL CHAPTER, INC.  
P. O. BOX 254186  
PATRICK AFB, FL 32925 US

**New Principal Place of Business:**

2065 MONA COURT  
MERRITT ISLAND, FL 329522904 US

**Current Mailing Address:**

MOAA CAPE CANAVERAL CHAPTER, INC.  
P. O. BOX 254186  
PATRICK AFB, FL 32925 US

**New Mailing Address:**

**FEI Number:** 59-1711052      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

TURNER, STEVEN G  
2065 MONA COURT  
MERRITT ISLAND, FL 32952 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: TD  
Name: TURNER, STEVEN G  
Address: 2065 MONA COURT  
City-St-Zip: MERRITT ISLAND, FL 32952 US

Title: P  
Name: NEUGEBAUER, SUSAN B  
Address: 1658 INDEPENDENCE AVENUE  
City-St-Zip: MELBOURNE, FL 32940 US

Title: 1VP  
Name: JOY, ERNEST H II  
Address: 1421 LARGO MAR DRIVE  
City-St-Zip: MELBOURNE, FL 32940 US

Title: 2VP  
Name: YELLE, COURTNEY A  
Address: 2001 JULEP DRIVE  
City-St-Zip: COCOA BEACH, FL 32931

Title: DIR  
Name: OBLACK, JOSEPH J  
Address: 2631 LITTLE BEND PLACE  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: SD  
Name: COTE, ROBERT R  
Address: 1081 IRONSIDE AVENUE  
City-St-Zip: VIERA, FL 32940

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: STEVEN G. TURNER

TD

04/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date