2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an address, with all other like empowered.

O ORDERVIED NAME OF SIGN

SIGNATURE:

Apr 26, 2005 8:00 am Secretary of State **DOCUMENT #754287** 04-26-2005 90169 041 ****61.25 PENSACOLA CHAPTER, INC., MILITARY OFFICERS ASSOCIATION OF AMERICA Principal Place of Business Mailing Address P.O. BOX 4979 P.O. BOX 4979 PENSACOLA, FL 32507 PENSACOLA, FL 32507 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04132005 Chq-NP CR2E037 (10/03) Applied For 4. FEI Number 58-9033907 City & State City & State Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 5. Name and Address of Current Registered Agent Name FRAZIER, JAMES Street Address (P.O. Box Number is Not Acceptable) 7645 BROOK FOREST PLACE PENSACOLA, FL 32514 Zip Code City 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Added to Fees Due by May 1, 2005 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition TITLE Delete TITLE ENGEL, JOAN NAME NAME 8775 THUNDERBIRD STREET ADDRESS STREET ADDRESS CITY-ST-7IP PENSACOLA, FL 32514 CITY-ST-78 1VP Change ☐ Addition ☐ Defete TITLE TITLE NAME CIARDELLO, CARMEN NAME 10107 SINTON DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32507 CITY-ST-ZIP Addition TITLE 2VP Deleta TITLE ☐ Change 2VP ALFORD, AL NAME NAME Gilley, Alfonsa STREET ADDRESS 5802 WEST SHORE DR STREET ADDRESS 8325 Groveland Ave PENSACOLA, FL 32526 CITY-ST-ZIP CITY-ST-ZIP Pensacola, Fl. 32534 Addition ☐ Delete TITLE ☐ Change TITLE FRAZIER, JAMES NAME NAME 7645 BROOK FOREST P: STREET ADDRESS STREET ADDRESS PENSACOLA, FL 32514 CITY-ST-ZIP CITY-ST-ZIP ■ Addition ☐ Chance TITLE Delete TITLE LIMBACH, WALTER NAME NAME STREET ADDRESS 8775 THUNDERBIRD STREET ADDRESS PENSACOLA, FL 32514 CITY-ST-ZIP CITY-ST-ZIP X Addition Delete TITLE ☐ Change TITLE LIMBACH, WALTER NAME MAME Milheim, William V. 8775 THUNDERBIRD STREET ADDRESS STREET ADDRESS 3001 Marcus Pointe Blvd PENSACOLA, FL 32514 CITY-ST-7IP CITY-ST-7IP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3(t)). Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if

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