


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 27, 2005 08:00 AM
Secretary of State

DOCUMENT # 762295

1. Entity Name
339TH FIGHTER GROUP ASSOCIATION, INC.



Principal Place of Business
**19410 US HWY 41
 LUTZ FL 33548
 US**

Mailing Address
**C/O JAMES R. STARNES
 P.O. BOX 251
 LUTZ FL 33548-0251
 US**

2. Principal Place of Business
 Suite, Apt #, etc

3. Mailing Address
 Suite, Apt #, etc.

City & State

Zip Country



1st MOORE CR2E037 (10/04)

6. Name and Address of Current Registered Agent
**STARNES, JAMES R.
 19410 U. S. HIGHWAY 41
 LUTZ FL 33548**

4. FEI Number **59-2176422**

Applied For
 Not Applicable

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 _____ DATE _____

(NOTE: Registered Agent signature required when reinstating)

**FILE NOW: FEE IS \$61.25
 Due By May 1, 2005**

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	<input type="checkbox"/> Delete
TD	THIEME, RICHARD G	2732 SOUTH SEVENTH STREET	SHEBOYGAN WI 53081	<input type="checkbox"/>
SD	ANANIAN, STEPHEN	4 N ORCHARD FARMS AVE	SIMPSONVILLE SC 29681	<input type="checkbox"/>
PD	STEPHENSON, ENOCH B JR	507 LOYOLA DRIVE	NASHVILLE TN 37205	<input type="checkbox"/>
VD	SAMS, THOMAS G	105 BOOT HILL	HORSESHOE BAY TX 78657	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify 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 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 changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Richard G. Thieme **RICHARD G. THIEME** 24 JAN 05 920-452-4780

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #