

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000004150

FILED
May 07, 2003
Secretary of State

Entity Name: 75TH OHIO VOLUNTEER INFANTRY REGIMENT, INC.

Current Principal Place of Business:

159 MEMORY LN.
PALM BAY, FL 32907

New Principal Place of Business:

Current Mailing Address:

159 MEMORY LN.
PALM BAY, FL 32907

New Mailing Address:

FEI Number: 59-3731633

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KING, TONDA
14598 SW 37TH CT
OCALA, FL 34473 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: V () Delete
Name: SAIA, PAUL
Address: 939 SEASHELL LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: NIGH, MARY ELLEN
Address: 1523 EAGLE AVE
City-St-Zip: PALM BAY, FL 32907

Title: DC () Delete
Name: KING, TONDA
Address: 14598 SW 37TH CT
City-St-Zip: OCALA, FL 34473

Title: P () Delete
Name: KING, BARRY
Address: 14598 SW 37TH CT
City-St-Zip: OCALA, FL 34473

Title: S () Delete
Name: SMITH, ANITA
Address: 6105 PINE TREE DR
City-St-Zip: FORT PIERCE, FL 34982

Title: T () Delete
Name: WHITEHEAD, WILLIAM
Address: 2708 RISEMAN ST
City-St-Zip: KISSIMMEE, FL 34743

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
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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: TONDA KING

DC

05/07/2003

Electronic Signature of Signing Officer or Director

Date