2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 11, 2002 8:00 am
Secretary of State
03-11-2002 90044 024 ****61.25

DOCUMENT # N03109

1. Entity Name

MOONPORT MODELERS, INC.

Principal Place of Business	Mailing Address
6625 HAVEN AVE COCOA FL 32927 US	P O BOX 782 TITUSVILLE FL 32781-0782 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4960 CARTER ST	P.O. Box 782
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: COCOA, FL	City & State: TITUSVILLE, FL
Zip: 32927 Country: BREVARD	Zip: 32781 Country: BREVARD

4. FEI Number: 59-3011150 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BINNS, GEORGE 6625 HAVEN AVE COCOA FL 32927	Name: Ralph McFarland Street Address (P.O. Box Number is Not Acceptable): 4960 CARTER ST. City: COCOA, FL Zip Code: 32927

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.

SIGNATURE: Ralph McFarland — 2/10/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ROBERTS, RONALD 2420 CHRISTINE DR TITUSVILLE FL 32796	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD JOHN MESSINA P.O. Box 2535 TITUSVILLE, FL 32781	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ROACH, RICHARD 1685 FIFE CT TITUSVILLE FL 32780	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RAYMOND LUNDY 7395 TURKEY POINT DR TITUSVILLE, FL 32780	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BINNS, GEORGE 6625 HAVEN AVE COCOA FL 32927	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD RALPH MCFARLAND 4960 CARTER ST. COCOA, FL. 32927	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD STARRICK, WILLIAM 151 HARRISON ST TITUSVILLE FL 32980	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD RICHARD SINEX 5385 JAMAICA RD. PORT ST. JOHN, FL. 32927	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: Ralph McFarland CONFIRMED — 2/10/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #