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CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -8 AM 9:37

DOCUMENT # N05109 (6)

1. Corporation Name

THE NATIONAL MANAGEMENT ASSOCIATION, LOCKHEED SP ACE OPERATIONS CHAPTER, INC.

Principal Place of Business	Mailing Address
1100 LOCKHEED WAY TITUSVILLE FL 32780	1100 LOCKHEED WAY TITUSVILLE FL 32780

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/12/1984
3a. Date of Last Report: 04/26/1994
4. FEI Number: 59-2496052 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business (21): Suite, Apt. #, etc. (22): City & State (23): Zip (24): Country (25)

2a. Mailing Address (26): Suite, Apt. #, etc. (27): City & State (28): Zip (29): Country (30)

9. Name and Address of Current Registered Agent

GRINDLE, DOUGLAS L
1100 LOCKHEED WAY
TITUSVILLE FL 32780

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	VD ☒ Change ☐ Addition
NAME	HERRMANN, ROBERT	1.2 NAME	Donna Herring,CM
STREET ADDRESS	450 MAUNA LOA CT	1.3 STREET ADDRESS	29 Country Club Road
CITY-ST-ZIP	MERRITT ISLAND FL	1.4 CITY-ST-ZIP	Cocoa Beach, FL 32931
TITLE	PD	2.1 TITLE	PD ☐ Change ☐ Addition
STREET ADDRESS	219 ROCKLEDGE DRIVE	2.3 STREET ADDRESS	(The Same)
CITY-ST-ZIP	ROCKLEDGE FL	2.4 CITY-ST-ZIP	
TITLE	COBD	3.1 TITLE	COBD ☒ Change ☐ Addition
NAME	HOUGLAND, LEN	3.2 NAME	Morris Susaneck, CM
STREET ADDRESS	20 SKYLINE BLVD.	3.3 STREET ADDRESS	540 S. Brevard Avenue, Unit 446
CITY-ST-ZIP	MERRITT ISLAND FL 32953	3.4 CITY-ST-ZIP	Cocoa Beach, FL 32931
TITLE	A	4.1 TITLE	A ☒ Change ☐ Addition
NAME	WALKER, SYLVIA Y.	4.2 NAME	Sylvia Walker
STREET ADDRESS	962 BUCKNELL PLACE	4.3 STREET ADDRESS	1422 Roger Street
CITY-ST-ZIP	ROCKLEDGE FL 32955	4.4 CITY-ST-ZIP	Cocoa, Florida 32922
TITLE	T	5.1 TITLE	T ☐ Change ☐ Addition
NAME	CORSON, PHYLLIS	5.2 NAME	(The Same)
STREET ADDRESS	1675 NEPTUNE	5.3 STREET ADDRESS	
CITY-ST-ZIP	MERRITT ISLAND FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	D ☐ Change ☐ Addition
NAME	JAMBA, JACK	6.2 NAME	(The Same)
STREET ADDRESS	4 JULY COURT	6.3 STREET ADDRESS	
CITY-ST-ZIP	SATELLITE BEACH FL	6.4 CITY-ST-ZIP	

Address change

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mary Kizis, President — 1/31/95 — 407-061-4922
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0032832