# FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 27 PM 3:11

DOCUMENT # N08286 (9)

1. Corporation Name
SPACE COAST CHAPTER, INC. THE RETIRED OFFICERS A SSOCIATION

| Principal Place of Business | Mailing Address |
|---|---|
| MALCOLM R. MENGHINI<br>PO BOX 1493<br>TITUSVILLE FL 32781-1493 | MALCOLM R. MENGHINI<br>PO BOX 1493<br>TITUSVILLE FL 32781-1493 |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/21/1985
3a. Date of Last Report: 11/07/1994
4. FEI Number: 59-2637172 ☐ 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 | 2a. Mailing Address |
|---|---|
| 21 Retired Officers Assoc. | 26 Retired Officers Assoc. |
| Suite, Apt. #, etc.<br>22 P.O. Box 1493 | Suite, Apt. #, etc.<br>27 P.O.Box 1493 |
| City & State<br>23 Titusville, Fl 32781-1493 | City & State<br>28 Titusville, Fl |
| Zip / Country<br>24 / 25 | Zip / Country<br>29 32781-1493 / 30 |

9. Name and Address of Current Registered Agent

STANFIELD, DONALD G
1615 CARRIAGE DR. E.
TITUSVILLE FL 32796

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

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | P | 11 TITLE | ☒ Change ☐ Addition |
| NAME | STANFIELD, DONALD G | 12 NAME | Tinsley, Robert President |
| STREET ADDRESS | 1615 CARRIAGE DR. E. | 13 STREET ADDRESS | 651 Oakwood Pl. |
| CITY-ST-ZIP | TITUSVILLE FL 32796 | 14 CITY ST ZIP | Titusville, Fl 32780 |
| TITLE | VP | 21 TITLE | ☒ Change ☐ Addition |
| NAME | TINSLEY, ROBERT S | 22 NAME | Steven Nall VPresident |
| STREET ADDRESS | 651 OAKWOOD PL | 23 STREET ADDRESS | 4747 S. Washington Ave. Unit B-6 |
| CITY-ST-ZIP | TITUSVILLE FL 32780 | 24 CITY ST ZIP | Titusville, Fl 32780-7327 |
| TITLE | D | 31 TITLE | ☒ Change ☐ Addition |
| NAME | ROWLAND, MARVIN | 32 NAME | Stanfield, Donald G. S/T |
| STREET ADDRESS | 3912 TANGLEWOOD CIR. | 33 STREET ADDRESS | 1615 Carriage Dr. E. |
| CITY-ST-ZIP | TITUSVILLE FL 32780 | 34 CITY ST ZIP | Titusville, Fl 32796 |
| TITLE | ST | 41 TITLE | ☒ Change ☐ Addition |
| NAME | NALL, STEVEN | 42 NAME | Keith, Robert D |
| STREET ADDRESS | 3803 WETHERFIELD CIR. | 43 STREET ADDRESS | 3932 Tanglewood Cir. |
| CITY-ST-ZIP | TITUSVILLE FL 32780 | 44 CITY ST ZIP | Titusville, Fl 32780 |
| TITLE | D | 51 TITLE | ☒ Change ☐ Addition |
| NAME | EGGE, GENE | 52 NAME | Brown, Robert D |
| STREET ADDRESS | 1918 DI POL COURTWAY | 53 STREET ADDRESS | 1931 Malmsey Ct. |
| CITY-ST-ZIP | TITUSVILLE FL 32780 | 54 CITY ST ZIP | Titusville, Fl 32796 |
| TITLE | D | 61 TITLE | ☒ Change ☐ Addition |
| NAME | STONE, MICHAEL | 62 NAME | Rowland, Marvin D |
| STREET ADDRESS | 1629 VALLEY FORGE DR. | 63 STREET ADDRESS | 3912 Tanglewood Cir. |
| CITY-ST-ZIP | TITUSVILLE FL 32796 | 64 CITY ST ZIP | Titusville, Fl 32780 |

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)(i), 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: Donald G. Stanfield S/T Feb. 21, 1995
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #