

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000002933

**FILED**  
**Apr 09, 2011**  
**Secretary of State**

**Entity Name:** MUSEUM OF MILITARY HISTORY, INC.

**Current Principal Place of Business:**

3831 W VINE ST BOX 64  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

**Current Mailing Address:**

3831 W VINE ST BOX 64  
KISSIMMEE, FL 34741

**New Mailing Address:**

**FEI Number:** 27-2114394

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CLARK, FRANK G  
1920 TAHITI PLACE  
KISSIMMEE, FL 347412020 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: C  
Name: SMITH, DONALD R  
Address: 4432 FREEDOM ROAD  
City-St-Zip: KISSIMMEE, FL 34746

Title: VC  
Name: GRIMES, GARY  
Address: 2295 LEA DR  
City-St-Zip: ST CLOUD, FL 34769

Title: D  
Name: CARMEAN, SCOTT  
Address: 1190 PECAN ST  
City-St-Zip: KISSIMMEE, FL 34741

Title: T  
Name: SMITH, FRAN  
Address: 4432 FREEDOM ROAD  
City-St-Zip: KISSIMMEE, FL 34746

I hereby 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 all other like empowered.

SIGNATURE: FRANK G. CLARK

AGNT

04/09/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date