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Feb 07 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N14764 (7)

1. Corporation Name

CHAPTER 170 SPACE COAST AREA CHAPTER, THE MILITARY ORDER OF THE WORLD WARS, INC.

Principal Place of Business

Mailing Address

PO BOX 4835
PATRICK AFB FL 32925PO BOX 4835
PATRICK AFB FL 329253. Date Incorporated or Qualified
05/06/19863a. Date of Last Report
05/21/1996

4. FEI Number

59-2097359

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GLOE, FREDRICK
960 MAYFLOWER AVE
MELBOURNE FL 32940

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME SCHNEIDER, JAMES M.
STREET ADDRESS 2748 ELM DR NE
CITY-ST-ZIP PALM BAY FL1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME WILLIAM H. PATTERSON
1.3 STREET ADDRESS 455 DIANA BLVD
1.4 CITY-ST-ZIP MERRITT ISLAND, FL 32953TITLE D ☐ DELETE
NAME DODD, STANLEY W
STREET ADDRESS 3795 WEEPING WILLOW ST
CITY-ST-ZIP MELBOURNE FL2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE SD ☐ DELETE
NAME SCHEMP, GEORGE C
STREET ADDRESS 228 SAN PAULO CIR.
CITY-ST-ZIP W. MELBOURNE FL3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE CD ☐ DELETE
NAME LOEB, WILLIAM J
STREET ADDRESS 1345 MAYFLOWER AVENUE
CITY-ST-ZIP MELBOURNE FL4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE D ☒ DELETE
NAME PEASE, CHARLES
STREET ADDRESS 1575 MERCURY STREET
CITY-ST-ZIP MERRITT ISLAND FL5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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:

William H. Patterson

2/2/97 (407) 452-1225

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/96)