

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90139 018 ****61.25

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DOCUMENT # N14764

1. Corporation Name

SPACE COAST-INDIAN RIVER CHAPTER, NO. 170, THE MILITARY ORDER OF THE WORLD WARS, INC.

Principal Place of Business

P O BOX 4835
PATRICK AFB FL 32925-0835
US

Mailing Address

P O BOX 25-4835
PATRICK AFB FL 32925-0835
US



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

05/06/1986

4. FEI Number

59-2097359

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

9. Name and Address of Current Registered Agent

MOALE, JOHN F
1640 OLD GLORY BLVD
MELBOURNE FL 32940

10. Name and Address of New Registered Agent

81 Name

John T. Murphy

82 Street Address (P.O. Box Number is Not Acceptable)

5635 S. Hwy A1A, #804

83

84 City

Melbourne Beach

FL

85 Zip Code

32951

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

John T. Murphy

John T. Murphy Vice Pres/Direct 11 Mar 1999

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	DIBBLE, JOHN JR	
STREET ADDRESS	467 BRIDGETOWN CT	
CITY-ST-ZIP	SATELLITE BEACH FL 32937	
TITLE	D	☐ DELETE
NAME	MOALE, JOHN F	
STREET ADDRESS	1640 OLD GLORY BLVD	
CITY-ST-ZIP	MELBOURNE FL 32940	
TITLE	D	☒ DELETE
NAME	PATTERSON, WILLIAM	
STREET ADDRESS	455 DIANA BLVD	
CITY-ST-ZIP	MERRITT ISLAND FL 32953	
TITLE	CD	☒ DELETE
NAME	LOEB, WILLIAM J	
STREET ADDRESS	1345 MAYFLOWER AVENUE	
CITY-ST-ZIP	MELBOURNE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	P/D	☐ Change ☒ Addition
12 NAME	Arthur G. Haggis, Jr.	
13 STREET ADDRESS	620 Verbenia Drive	
14 CITY-ST-ZIP	Satellite Beach, FL 32937	
21 TITLE	V/D	☐ Change ☒ Addition
22 NAME	John T. Murphy	
23 STREET ADDRESS	5635 S. Hwy A1A, #804	
24 CITY-ST-ZIP	Melbourne Beach, FL 32951	
31 TITLE	T/D	☐ Change ☒ Addition
32 NAME	Henry C. Pearman	
33 STREET ADDRESS	1059 Continental Ave	
34 CITY-ST-ZIP	Melbourne, FL 32940	
41 TITLE	S	☐ Change ☒ Addition
42 NAME	John A. Ritner	
43 STREET ADDRESS	1608 Pioneer Drive	
44 CITY-ST-ZIP	Melbourne, FL 32940	
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. 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 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, with all other like empowered.

SIGNATURE: *John A. Ritner* JOHN A. RITNER, SCTY 11 Mar 1999 (407)255-6669

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)