2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

POTTINE AND TYPE OF BRINGED NAME OF SIGNING OF CER OR BUSECTOR

FILED Mar 01, 2000 8:00 am Secretary of State DOCUMENT # N14764 1. Entity Name SPACE COAST-INDIAN RIVER CHAPTER, NO. 170, THE M 03-01-2000 90062 016 ****61.25 Principal Place of Business Mailing Address P O BOX 25-4835 P O BOX 4835 PATRICK AFB FL 32925-0835 PATRICK AFB FL 32925-4835 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2097359 Not Applicable \$8.75 Additional Zip Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) MURPHY, JOHN T 5635 S. HWY A1A #804 MELBOURNE FL 32951 City Zip Code 8. 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **FEE IS \$61.25** Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. VD ☐ Change Addition TITLE Delete TITLE NAME HAGGIS, ARTHUR G JR NAME KING, MAXWELL C. STREET ADDRESS STREET ADDRESS 620 VERBENIA DR 384 Walton Heath Court CITY-ST-ZIP CITY-ST-ZIP SATELLITE BEACH FL 32937 Rockledge, Florida 32955 Addition ☐ Change ■ Delete TITLE TITLE MCKEOWN, J. KEVIN AMAR MOALE, JOHN F NAME STREET ADDRESS 384 Walton Heath Court 1640 OLD GLORY BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MELBOURNE FL 32940 Rockledge, Florida 32955 VD. X Change ☐ Addition TITLE Delete TITLE PD MURPHY, JOHN T NAME NAME STREET ADDRESS STREET ADDRESS 5635 S. HWY A1A #804 CITY-ST-7IP CITY-ST-ZIP MELBOURNE BCH FL 32951 ☐ Change X Addition TITLE ☐ Delete TITLE PEARMAN, HENRY C NAME MURPHY, KATHERINE R. NAME STREET ADDRESS 1710 Atlantic Street, #5C STREET ADDRESS 1059 CONTINENTAL AVE CITY-ST-ZIP CITY-ST-ZIP **MELBOURNE FL 32940** Melbourne Beach, Florida 32951 Addition □ Delete TITLE Change HILLIARD, JOHN R. 408 St. George Court RITNER, JOHN A NAME STREET ADDRESS 1608 PIONEER DR STREET ADDRESS CITY-ST-ZIP Satellite Beach, Florida 32937 CITY-ST-ZIP MELBOURNE FL 32940 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIE 12. 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 report or supplemental 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 accurate and that my signature by Chapter §17, Florida Statutes; and that my name appears in Block 10 or Block 11 if

Daytime Phone #

321-676-2525