

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 26, 2004 8:00 am
Secretary of State

01-26-2004 90004 025 ****66.25

DOCUMENT # N94000002539
 1. Entity Name
THE 388TH BOMB GROUP ASSOCIATION, INC.



Principal Place of Business: 3901 S.E. 9TH COURT, CAPE CORAL FL 33904-5214 US
 Mailing Address: 3901 S.E. 9TH COURT, CAPE CORAL FL 33904-5214 US

54000527



MOORE CR2E037 (11/03)

2. Principal Place of Business: Suite, Apt. #, etc.
 3. Mailing Address: Suite, Apt. #, etc.
 City & State: _____
 Zip: _____ Country: _____

4. FEI Number: **65-0560339**
 Applied For: Not Applicable
 5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
FINKBEINER, CLARENCE E
3901 S.E. 9TH COURT
CAPE CORAL FL 33904-5214

7. Name and Address of New Registered Agent
 Name: _____
 Street Address (P.O. Box Number is Not Acceptable): _____
 City: _____ **FL** 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	2VP	<input type="checkbox"/> Delete
NAME	CURTIS, LARRY	
STREET ADDRESS	6210 SHAMROCK DR.	
CITY-ST-ZIP	MADISON LAKE MN 56063	
TITLE	P	<input type="checkbox"/> Delete
NAME	TIMBERLAKE, RICHARD	
STREET ADDRESS	220 DEER FIELD RD	
CITY-ST-ZIP	BOGART GA 30622	
TITLE	D	<input type="checkbox"/> Delete
NAME	COTTON, JAMES	
STREET ADDRESS	12945 LOWER RIVER RD.	
CITY-ST-ZIP	ORLANDO FL 32825-9026	
TITLE	V	<input type="checkbox"/> Delete
NAME	DANIELS, WAYNE	
STREET ADDRESS	18594 JUDE ISLAND CIRCLE	
CITY-ST-ZIP	EAGLE RIVER AK 99577	
TITLE	D	<input type="checkbox"/> Delete
NAME	MILLER, DAVID L	
STREET ADDRESS	3906 OAK DALE DR	
CITY-ST-ZIP	PEARLAND TX 77581	
TITLE	T	<input type="checkbox"/> Delete
NAME	FINKBEINER, CLARENCE E	
STREET ADDRESS	3901 SE 9TH CT	
CITY-ST-ZIP	CAPE CORAL FL 33904	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WARD, ROBERT	
STREET ADDRESS	P.O. BOX 6	
CITY-ST-ZIP	CANADIAN, TX 79014-0006	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TIMBERLAKE, RICHARD	
STREET ADDRESS	220 DEER FIELD RD	
CITY-ST-ZIP	BOGART GA 30622-1739	
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROMEO, CARMEN	
STREET ADDRESS	2855 BANYAN BLVD CIRCLE	
CITY-ST-ZIP	Boca RATON, FL 33431-6326	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DANIELS, WAYNE	
STREET ADDRESS	18594 JUDE ISLAND CIRCLE	
CITY-ST-ZIP	EAGLE RIVER AK 99577-1122	
TITLE	2VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, DAVID L	
STREET ADDRESS	3906 OAK DALE DRIVE	
CITY-ST-ZIP	PEARLAND, TX 77581-6154	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Clarence E Finkbeiner 1-20-2004 (239) 542-1076
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #