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NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

N97000004559 (7)

ALPHA AVIATION MISSION OUTREACH CENTER, INC.

**FILED** 

May 18 1998 8:00am

Secretary of State

|   |   |   | }  |
|---|---|---|--|
| Principal Place of Business   | Mailing Address   |   | # (navitur) and latit varit drill natit patit bosts drill apit of but alian arith alia)  |
| 3131 #30 UNIVERSITY BLVD. N.  | 3131 #30 UNIVERSITY BLVD                                    | ). N.   | 3. Date Incorporated or Qualified  |
| JACKSONVILLE FL 32277   | JACKSONVILLE FL 32277                                       |   | 08/12/1997   |
|   |   |   | 4. FEI Number Applied For  |
|   | <del> </del>  |   | 59~3462455 Not Applicable  |
| 2. Principal Place of Business  | 2a. Mailing Address   |   | 5. Certificate of Status Desired \$8.75 Additional   |
| 21 11515 Monument Lake Cir Sulte, Apt. #, etc.  | 26 P.O. Box 87. Suite, Apt. #, etc.                         | 30  | Fee Required   |
| <del>[                                    </del>  | 27 Suite, Apr. #, etc.                                      |   | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees   |
| City & State  | City & State  |   | 7. Is this nonprofit corporation a homeowners association?   |
| Jacksonville FL   | Jacksonville,   | , FL  | ☐ Yes X No   |
| Zip Country   | 32239   | Country   | 8. This corporation owes or has paid the current year Intangible   |
| [24]  | (3)   | 30}   | Personal Property Tax due June 30. Yes X No  |
| 9. Name and Address of Current Re   | egistered Agent   | 81 Name   | 10. Name and Address of New Registered Agent   |
| Ballatani . B   |   | 01) Idaslie   |  |
| BAUMANN, J.R.   |   | 82 Street   | Address (P.O. Box Number is Not Acceptable)  |
| 3131 #30 UNIVERSITY BLVD. N. JACKSONVILLE FL 32277  |   | 83  |  |
| MONSONVILLE PL 32211  |   |   |  |
|   |   | 84 City   | FI 85 Zip Code   |
| 11. Pursuant to the provisions of Sections 617,0502 ar  | d 617.1508, Florida Statutes                                | s, the above-named  | corporation submits this statement for the purpose of changing its registered  |
| office or registered agent, or both, in the State of F agent. I am familiar with, and accept the obligation   | lorida. Such change was aเ<br>าร of, Section 617.0503, Flor | ithorized by the cor<br>ida Statutes.   | poration's board of directors. I hereby accept the appointment as registered   |
| SIGNATURE   |   |   |  |
| Stgnature, typed or printed name of registered agent an   |   |   | e required when reinstating) DATE  |
| 12. OFFICERS AND D  | IRECTORS  | 13.   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  |
| inver I DD  | DELETE  | A L TITLE   | The state of the s |
| TILE PD   | DELETE  | 1 1 TITLE   | VD Change Addition   |
| NUME BAUMANN, J.R.  | ☐ DELETE  | 1.2 NAME  | VD Change Addition Ronald G. Krewson   |
| HAME BAUMANN, J.R. STREET ADDRESS P. O. BOX 8730  | DELETE  | 1.2 NAME<br>1.3 STREET ADDRESS  | VD Ronald G. Krewson Rt. 1, Box 222-1  |
| NAME BAUMANN, J.R. STREET ADDRESS P. O. BOX 8730 CITY-ST-ZIP JACKSONVILLE FL 32239  | DELETE  | 1.2 NAME  | VD Ronald G. Krewson Rt. 1, Box 222-1 Cleveland, OK 74020  |
| NAME BAUMANN, J.R. STREET ADDRESS P. O. BOX 8730 CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE VD   |   | 1.2 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY-ST-ZIP   | VD Ronald G. Krewson Rt. 1, Box 222-1 Cleveland, OK 74020 D Change X Addition  |
| NAME BAUMANN, J.R. STREET ADDRESS P. O. BOX 8730 CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE VO NAME HOLLIS, D.M.   |   | 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME  | VD Change Addition Ronald G. Krewson Rt. 1, Box 222-1 Cleveland, OK 74020 D Change Addition William Howze McDonald   |
| NAME BAUMANN, J.R. STREET ADDRESS P. O. BOX 8730 CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE VD NAME HOLLIS, D.M. STREET ADDRESS 2768 KINGSTREE DR. W-#4  |   | 1.2 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY-ST-ZIP<br>2.1 TITLE  | VD Ronald G. Krewson Rt. 1, Box 222-1 Cleveland, OK 74020 D William Howze McDonald 4703 Durant Rd.   |
| NAME BAUMANN, J.R. STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE VD NAME HOLLIS, D.M. STREET ADDRESS 2768 KINGSTREE DR. W-#4   |   | 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS   | VD Change Addition Ronald G. Krewson Rt. 1, Box 222-1 Cleveland, OK 74020 D Change Addition William Howze McDonald   |
| NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE VD NAME HOLLIS, D.M. STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32211   | <b>™</b> DELETE   | 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP   | VD Ronald G. Krewson Rt. 1, Box 222-1 Cleveland, OK 74020 D William Howze McDonald 4703 Durant Rd. Dover, FL 33527 D Change X Addition Change X Addition Change X Addition James Michael DeSormeau   |
| NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE VD NAME HOLLIS, D.M. STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32211 TITLE STD NAME STREET ADDRESS BAUMANN, CHARLETTA STREET ADDRESS P.O. BOX 8730   | <b>™</b> DELETE   | 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE   | VD Ronald G. Krewson Rt. 1, Box 222-1 Cleveland, OK 74020 D William Howze McDonald 4703 Durant Rd. Dover, FL 33527 D James Michael DeSormeau 11515 Monument Lake Circle  |
| NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE VD NAME HOLLIS, D.M. STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32211 TITLE STD NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32211 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32239  | DELETE  | 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP  | VD   Change  |
| NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE VD NAME HOLLIS, D.M. STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32211 TITLE STD NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32211 TITLE STD NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE   | <b>™</b> DELETE   | 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE  | VD Ronald G. Krewson Rt. 1, Box 222-1 Cleveland, OK 74020 D William Howze McDonald 4703 Durant Rd. Dover, FL 33527 D James Michael DeSormeau 11515 Monument Lake Circle  |
| NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE VO NAME HOLLIS, D.M. STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32211 TITLE STD NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32211 TITLE STD NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE NAME  | DELETE  | 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME   | VD Change Addition  Ronald G. Krewson  Rt. 1, Box 222-1 Cleveland, OK 74020  D Change Addition  William Howze McDonald 4703 Durant Rd.  Dover, FL 33527  D Change Addition  James Michael DeSormeau 11515 Monument Lake Circle  Jacksonville, FL 32225  PD Change Addition   |
| NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE VO NAME HOLLIS, D.M. STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32211 TITLE STD NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32211 TITLE STD NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS  | DELETE  | 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS  | Change   Addition  |
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| NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE VD NAME HOLLIS, D.M. STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32211 TITLE STD NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32211 TITLE STD BAUMANN, CHARLETTA P.O. BOX 8730 CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE  | DELETE  | 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE  | Ronald G. Krewson Rt. 1, Box 222-1 Cleveland, OK 74020 D   |
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| NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE VD NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32231 TITLE STD NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32211 TITLE STD NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS  | DELETE  | 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS                | Ronald G. Krewson Rt. 1, Box 222-1 Cleveland, OK 74020 D   |
| NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE VD NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32211 TITLE STD NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32211 TITLE STD NAME STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32239 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME   | DELETE  | 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME                                   | Ronald G. Krewson Rt. 1, Box 222-1 Cleveland, OK 74020 D William Howze McDonald 4703 Durant Rd. Dover, FL 33527 D James Michael DeSormeau 11515 Monument Lake Circle Jacksonville, FL 32225 PD Baumann, J.R. 3131 University Blvd. N #30 Jacksonville, FL 32277 STD Change Addition Baumann, Charletta 3131 University Blvd. N #30   |
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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.

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR BIRECTOR

J.R. Baumann

(904)745-5551

Daytime Phone # 0079784