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Secretary of State

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P10792

1. Corporation Name
UNITED ARMED FORCES ASSOCIATION, INC.

Principal Place of Business
425 AUSTIN AVE STE 1802
PO BOX 2603
WACO TX 76701
US

Mailing Address
425 AUSTIN AVE STE 1802
PO BOX 2603
WACO TX 76701
US



21	2. Principal Place of Business	26	2a. Mailing Address
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.
23	City & State	28	City & State
24	Zip	29	Zip
	Country	30	Country

3.	Date Incorporated or Qualified	07/16/1986	Applied For
4.	FEI Number	74-2412443	Not Applicable
5.	Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
6.	Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

JOHNSON, ANDREW C.
8282 WESTERN WAY CIRCLE
STE 1251
JACKSONVILLE FL 32256

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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 _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
DT	NALL, KENNETH	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
425 AUSTIN AVE SUITE 1802	WACO TX	2.1 TITLE	2.2 NAME
		2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
S	HUDSON, JENNIFER D	3.1 TITLE	3.2 NAME
425 AUSTIN AVE., SUITE 1802	WACO TX	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
		4.1 TITLE	4.2 NAME
DVP	STADING, RON	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
5845 ONIX SUITE 104	EL PASO TX	5.1 TITLE	5.2 NAME
		5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
P	WALKER, ROBERT J	6.1 TITLE	6.2 NAME
2700 ROYESTER CT	VIRGINIA BEACH VA	6.3 STREET ADDRESS	6.4 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 REQUIRED Kenneth Nall

01/06/99

254-297-2795