FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -6 PM 12:15

DOCUMENT # N11932 (3)

1. Corporation Name
SKY HIGH AMATEUR RADIO CLUB, INC.

Principal Place of Business	Mailing Address
401 N TURKEY PINE LOOP LECANTO FL 34461 US	401 N TURKEY PINE LOOP 401 N TURKEY PINE LOOP LECANTO FL 34461 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/06/1985
3a. Date of Last Report: 03/08/1994
4. FEI Number: 59-2643904 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 665 NE 13th TERRACE	26 PO Box 572
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: CRYSTAL RIVER FL	28 City & State: LECANTO FL
24 Zip: 34428 25 Country: US	29 Zip: 34460 30 Country: US

9. Name and Address of Current Registered Agent

BROMLEY, RICHARD G
401 N TURKEY PINE LOOP
LECANTO FL 34461

10. Name and Address of New Registered Agent

81 Name: RICHARD V RINGEL
82 Street Address (P.O. Box Number is Not Acceptable): 665 NE 13th TERRACE
83
84 City: CRYSTAL RIVER FL 85 Zip Code: 34428

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Richard V Ringel RICHARD RINGEL 29 JAN 1995
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VP	1.1 TITLE	VICE PRESIDENT	☒ Change ☐ Addition
NAME	VIGLIONE, DONNA	1.2 NAME	CHAD JOHNSON	
STREET ADDRESS	9235 S TIMBERLANE TER	1.3 STREET ADDRESS	5050 N AMARILLO DR	
CITY-ST-ZIP	INVERNESS FL	1.4 CITY-ST-ZIP	BEVERLY HILLS FL 34456	
TITLE	P	2.1 TITLE		☐ Change ☐ Addition
NAME	PHILLIPS, ART	2.2 NAME		
STREET ADDRESS	7 S FILLMORE ST	2.3 STREET ADDRESS		
CITY-ST-ZIP	BEVERLY HILLS FL	2.4 CITY-ST-ZIP		
TITLE	S	3.1 TITLE	SECRETARY	☒ Change ☐ Addition
NAME	WEAVER, HILDA A.	3.2 NAME	JEFF IDDINGS	
STREET ADDRESS	8061 N. GOLFVIEW DRIVE	3.3 STREET ADDRESS	9726 E MONICA CT	
CITY-ST-ZIP	CITRUS SPRINGS FL	3.4 CITY-ST-ZIP	INVERNESS FL 34450	
TITLE	T	4.1 TITLE	TREASURER	☒ Change ☐ Addition
NAME	BROMLEY, RICHARD	4.2 NAME	RICHARD RINGEL	
STREET ADDRESS	401 N TURKEY PINE LOOP	4.3 STREET ADDRESS	665 NE 13th TERRACE	
CITY-ST-ZIP	LECANTO FL	4.4 CITY-ST-ZIP	CRYSTAL RIVER FL 34428	
TITLE	D	5.1 TITLE	DIRECTOR	☒ Change ☐ Addition
NAME	BARRETT, RICHARD O.	5.2 NAME	CHARLES BILHARZ	
STREET ADDRESS	6205 W. GWEN LANE	5.3 STREET ADDRESS	408 NE CRYSTAL ST	
CITY-ST-ZIP	HOMOSASSA FL	5.4 CITY-ST-ZIP	CRYSTAL RIVER FL 34428	
TITLE	D	6.1 TITLE		☐ Change ☐ Addition
NAME	WEAVER, LARRY H	6.2 NAME		
STREET ADDRESS	8061 N GOLFVIEW DR	6.3 STREET ADDRESS		
CITY-ST-ZIP	CITRUS SPRINGS FL	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Richard V Ringel RICHARD RINGEL 29 JAN 1995 904-795-0628
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0919339