

2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N00000005982

Entity Name: MILITARY HERITAGE MUSEUM, INC.

Current Principal Place of Business:

900 W MARION AVE.
PUNTA GORDA, FL 33950

Current Mailing Address:

900 W MARION AVE.
PUNTA GORDA, FL 33950 US

FEI Number: 65-1036360

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUTLER, GARY P
1729 SUZI STREET
PUNTA GORDA, FL 33950 US

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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title SECRETARY
Name HARRIS, ROBERT S
Address 1401 SEA GULL CT.
City-State-Zip: PUNTA GORDA FL 33950

Title PRESIDENT
Name KOCH, REXFORD R.
Address 1446 CASEY KEY DRIVE
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR
Name BUCKINGHAM, FREDRIC
Address 2224 CASSINO CT
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR
Name MATTHEWS, LYNNE R
Address 1256 PINE SISKIN DR.
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR
Name METCALFE, CYNTHIA J
Address 3507 DILEUCA ST.
City-State-Zip: PUNTA GORDA FL 33950

Title VP
Name WOOSTER, MICHAEL H
Address 668 W. OLYMPIA AVE.
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR
Name HOWARD, JOHN PATRICK
Address 2521 RIO LISBO COURT
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR
Name MOONEY, MARILYN
Address 654 ANDROS COURT
City-State-Zip: PUNTA GORDA FL 33950

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: REXFORD KOCH

PRESIDENT

10/08/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BURDA III, ALOIS J
Address 737 SILK OAK DRIVE
City-State-Zip: VENICE FL 34293

Title DIRECTOR
Name DIONISIO, STEPHEN
Address 47 DONIPHAN DR
City-State-Zip: PORT CHARLOTTE FL 33954

Title DIRECTOR
Name DAVID , MARTENS
Address 3606 TRIPOLI BLVD.
City-State-Zip: PUNTA GORDA FL 33950