

2024 FLORIDA NOT FOR PROFIT CORPORATION 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: Yes

Name and Address of Current Registered Agent:

KNUFFKE, DEREK
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: DEREK KNUFFKE

03/06/2024

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

Title VP
Name FRANCIS, RANDALL
Address 18401 MURDOCK CIRCLE
SUITE B
City-State-Zip: PORT CHARLOTTE FL 33948

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

Title DIRECTOR
Name VIANELLO , MARK
Address 1445 EDUCATION WAY
City-State-Zip: PORT CHARLOTTE FL 33948

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

Title DIRECTOR
Name GRANT OLIVER, VANESSA
Address 4351 PINNACLE STREET
City-State-Zip: CHARLOTTE HARBOR FL 33980

Title DIRECTOR
Name FRANZINO, BARRY
Address 3662 TURTLE DOVE BLVD
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: ROBERT S HARRIS

SECRETARY

03/06/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TREASURER
Name PRIOR, ARTHUR
Address 4379 HARBOR BLVD
City-State-Zip: PORT CHARLOTTE FL 33952

Title DIRECTOR
Name HARRELL, GARY D
Address 1494 RAVEN CT
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR
Name FULLER, PATRICK
Address 159 SAPODILLA ST
City-State-Zip: PUNTA GORDA FL 33980

Title DIRECTOR
Name RICHINS, MICAH
Address 4949 TAMIAMI TRAIL
City-State-Zip: CHARLOTTE HARBOR FL 33980

Title DIRECTOR
Name JOHNSON, ERIC
Address 1515 TAMIAMI TRAIL
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR
Name MISCIA, SUSAN
Address 3606 TRIPOLI BLVD
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR
Name FIORINO , RUSS
Address 1410 TAMIAMI TRAIL
City-State-Zip: PUNTA GORDA FL 33950