

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00594

**FILED**  
**Jan 23, 2017**  
**Secretary of State**  
**CC2470742927**

**Entity Name:** THE FIRST FLORIDA CHAPTER OF THE MILITARY VEHICLE PRESERVATION ASSOCIATION, INC.

**Current Principal Place of Business:**

78 FISHER WAY LOOP  
OCKLAWAHA, FL 32179

**Current Mailing Address:**

78 FISHER WAY LOOP  
OCKLAWAHA, FL 32179 US

**FEI Number: 59-2362278**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

THOMAS, DAVID S  
78 FISHER WAY LOOP  
OCKLAWAHA, FL 32179 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           PRESIDENT  
Name           THOMAS, DAVID S  
Address        78 FISHER WAY LOOP  
City-State-Zip: OCKLAWAHA FL 32179

Title           TREASURER  
Name           ROBERTS, MICHAEL  
Address        1510 SE 5TH STREET  
City-State-Zip: STUART FL 34996

Title           SECRETARY  
Name           KINMONTH, STANLEY A III  
Address        194 MALLEY COVE LANE  
City-State-Zip: FLEMING ISLAND FL 32003

Title           WEB- SITE ADMINISTRATOR  
Name           FRANCIS, ROGER  
Address        110 SWEETWATER BLVD. NORTH  
City-State-Zip: LONGWOOD FL 32779

Title           VP  
Name           ORR, LINDSAY  
Address        36551LESLYE LANE  
City-State-Zip: EUSTIS FL 32736

*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: DAVID S THOMAS**

**PRESIDENT**

**01/23/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date