

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000005753

**Entity Name:** INTERNATIONAL WAR MUSEUM INC**Current Principal Place of Business:**3800 7TH AVE S  
ST PETERSBURG, FL 33705**Current Mailing Address:**P O BOX 16865  
ST PETERSBURG, FL 33733 US**FEI Number:** 47-1139301**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REMO, MIKE  
1905 16TH STREET N  
ST PETERSBURG, FL 33704 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	P
Name	REMO, MIKE
Address	1905 16TH STREET N
City-State-Zip:	ST PETERSBURG FL 33704

Title	DIR
Name	LA COE, DON
Address	194 BUNCOMBE HILL LANE
City-State-Zip:	MT OLIVE NC 28365

Title	DIR
Name	BRUNING, STEPHANIE P
Address	1905 REDWOOD AVENUE
City-State-Zip:	MELBOURNE BEACH FL 32951

Title	DIR
Name	SMITH, MATT
Address	BOX 158
City-State-Zip:	HAYDEN AL 35079

Title	DIR
Name	DAMAZO, LANE
Address	4936 BURKITTSVILLE RD
City-State-Zip:	KNOXVILLE MD 21758

*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:** MIKE REMO**PRESIDENT****04/30/2015**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date