## 2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36381

Entity Name: TITUSVILLE AMATEUR RADIO CLUB, INC.

**Current Principal Place of Business:** 

4060 FAWN LAKE BLVD MIMS. FL 32754

**Current Mailing Address:** 

P O BOX 73

TITUSVILLE. FL 32781

FEI Number: 59-2997556 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SCHINDLER, STEVEN F 4060 FAWN LAKE BLVD MIMS, FL 32754 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: STEVEN F SCHINDLER 01/19/2025

Electronic Signature of Registered Agent

Date

**FILED** Jan 19, 2025

**Secretary of State** 

0604509959CC

Officer/Director Detail:

Title **PRESIDENT** Title **SECRETARY** 

FEE, PAUL Name Name MERRITT, STEPHANIE 3850 CHAMPION RD Address 2885 NIGHT HERON DR Address City-State-Zip: TITUSVILLE FL 32780 MIMS FL 32754 City-State-Zip:

VΡ Title Title **TREASURER** 

Name DESOTO, KEITH Name SCHINDLER, STEVEN F Address 195 COSTA RICA Address 4060 FAWN LAKE BLVD

EDGEWATER FL 32141 City-State-Zip: MIMS FL 32754 City-State-Zip:

Title DIRECTOR Title **DIRECTOR** 

Name FULLER, THOMAS L KENNEDY, BARRY JR. Name Address 4445 AURANTIA RD 4636 ZOLTAN DRIVE Address City-State-Zip: MIMS FL 32754

City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR Title DIRECTOR MERRITT, ROY Name MCLEAN, DAVE Name

Address 3850 CHAMPION ROAD 3441 WILLIS DRIVE Address City-State-Zip: TITUSVILLE FL 32796

TITUSVILLE FL 32796 City-State-Zip:

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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.

01/19/2025 SIGNATURE: STEVEN F SCHINDLER TREASURER

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name SPADE, DONALD

Address 3855 HICKORY HILL BLVD
City-State-Zip: TITUSVILLE FL 32780