

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 21, 2007 8:00 am
Secretary of State

02-21-2007 90025 004 ****70.00

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1. Entity Name

THE ST. PETERSBURG AREA CHAPTER MILITARY
OFFICERS ASSOCIATION OF AMERICA, INC.



Principal Place of Business

Mailing Address

P.O. BOX 7054
ST PETERSBURG FL 33734
US

P.O. BOX 7054
ST PETERSBURG FL 33734
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-6202290

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BURRELL, BASIL V
519 APPUAN WAY N.E.
SAINT PETERSBURG FL 33704

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Basil V. Burrell
Basil V. BURRELL

Jan. 29, 2007

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	FREESE, DONALD R	
STREET ADDRESS	4613 MIRABELLA CT.	
CITY- ST- ZIP	SAINT PETERSBURG FL 33706	
TITLE	VD	☒ Delete
NAME	NEVILLE, ALBERT R	
STREET ADDRESS	1467-52ND AVE N.E	
CITY- ST- ZIP	SAINT PETERSBURG FL 33703	
TITLE	SD	☒ Delete
NAME	BURRELL, BASIL V	
STREET ADDRESS	519 APPLAN WAY N.E	
CITY- ST- ZIP	SAINT PETERSBURG FL 33704	
TITLE	TD	☐ Delete
NAME	DAWSON, PETER J	
STREET ADDRESS	959 EDEN ISLE DR. N.E.	
CITY- ST- ZIP	SAINT PETERSBURG FL 33704	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE	VD	☒ Change ☐ Addition
NAME	Fernald, Laurance N.	
STREET ADDRESS	582 Quintana Place NORTH	
CITY- ST- ZIP	Saint Petersburg, FL 33703	
TITLE	VD	☒ Change ☐ Addition
NAME	Mogan, Janice L.	
STREET ADDRESS	5610 Dartmouth Ave NORTH	
CITY- ST- ZIP	Saint Petersburg, FL 33710	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE	SD	☐ Change ☒ Addition
NAME	BENSON, DOROTHY K.	
STREET ADDRESS	1892 62ND TERRACE SOUTH	
CITY- ST- ZIP	ST PETERSBURG, FL 33712	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Basil V. Burrell
Basil V. BURRELL Jan. 29, 2007 (727) 821-7365

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #