FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

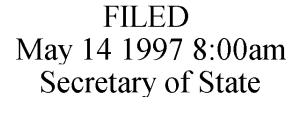
1997 DOCUMENT #

BOEING NORTH AMERICAN

NATIONAL MANAGEMENT ASSOCIATION - ROCKWELL-INTER NATIONAL, FLORIDA CHAPTER, INC.

Principal Place of Business

Mailing Address





KENNEDY SPAC P.O. BOX 21105 KENNEDY SPAC		KENNEDY SPACE CENTEI P.O. BOX 21105 KENNEDY SPACE CENTEI		3. Date Incorporated or Qualified 11/29/1965	3a. Date of Last Report 06/20/1996	
<u> </u>	ace of Business	2a, Mailing Address		4. FEI Number 59-6196150	Applied For	
21 Sulte, Apt. #, etc. 22		26 Suite, Apt. #, etc.		5. Certificate of Status Desired	Not Applicable \$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 26	Z(p 29	Country 30	1101104 01410100	Yes No	
	Name and Address of Curr	ent Registered Agent	81 Nar	10. Name and Address of New Re	gistered Agent	
			81 Nar	ne		
SOLID; LEE 785 RIVER OAKS DR. MERRITT ISLAND FL 32953			62 Stre	82 Street Address (P.O. Box Number is Not Acceptable)		
			83		a salah seringan sahara	
ļ			84 City		85 Zip Code	
		500 d 647 4500 Florido 64-b	too the obeye now	ed corporation submits this statement for the p	FL 63 Zip Code	
office or re agent. I an SIGNATURE	egistered agent, or both, in the Sta m familiar with, and accept the obl	ate of Florida. Such change was ligations of, Section 617.0503, F	authorized by the d lorida Statutes	corporation's board of directors. I hereby accep	ot the appointment as registered	
12.	Signature, typed or printed name of registered a OFFICERS, A	AND DIRECTORS (NO	13.	ature required when reinstalling) ADDITIONS/CHANGES TO OFFIC		
TITLE	TD OF TREE TO	DELETE	1.1 TITLE	VD	Change Addition	
NAME	SIMS, VICKI		1.2 NAME	12		
STREET ADDRESS	64 BOGART PLACE		1.3 STREET ADDRE	ss		
CITY-ST-ZIP	MERRITT ISLAND FL	DELETE	1.4 CiTY-ST-ZIP		☐ Change ☐ Additio	
TITLE		[] DELETE	2.1 TITLE 2.2 NAME	80000219		
NAME STREET ADDRESS	HEINK, BILL 685 TIMUQUANA DR.		2.3 STREET ADDRE	. DE 797 707 0101		
CITY-ST-ZIP	MERRITT ISLAND FL		2.4 CITY-ST-ZIP	***61.25		
TITLE	\$D	DELETE	3.1 TITLE	P	Change Addition	
NAME	RILEY, CATHY		3.2 NAME	Phillip Koon	•	
STREET ADDRESS	1529 SCHOOLHOUSE ST.		3.3 STREET ADDRE	1 13703 Hamond Billo		
CITY-ST-ZIP	MERRITT ISLAND FL	▼ DELETE	3.4. CITY-ST-ZIP	Orlando, FL 32832	Change Addition	
TITLE	VD	M nere is	4.1 TITLE 4. 2 NAME	TD Shown Heath	Las onenge C Addition	
NAME Street address	MOSRIE, WAN 1485 HOLLY AVE.		4.2 NAME 4.3 STREET ADDRE	Shaun Heath	role	
CITY-ST-ZIP	MERRITT ISLAND FL		4.4 CITY - ST - ZIP	\$\ \text{1770 Windover Oaks Ci} \text{Titusville, FL 32780}		
TITLE	P	▼ DELETE	5.1 T(TL€	SD SD	Change Addition	
NAME	HOSKINS, JACKIE		5.2 NAME	Kenneth Mayer	NU WALL	
STREET ADDRESS	2240 LEASIDE CT.		5.3 STREET ADDRE	S 2980 Kelley Street		
CITY-\$T-ZIP	TITUSVILLE FL		5.4 CITY-ST-ZIP	Titusville, FL 32780		
TITLE	PP	DELETE	6.1 TITLE	PP	X Change Addition	
NAME	LYDE, PAME	A	6.2 NAME	Alan Seraphine		
STREET ADDRESS	115 ESCAMBIA LANE #40	Ď	6.3 STREET ADDRE	1720 IIG IICC DIIVC		
CITY-ST-ZIP	COCOA BEACH FL		6.4 CITY-ST-ZIP	Titusville FL 32780	17.0	

I do hereby certify that the Information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 I changed, or on an attachment with an address.