2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

	DOCUMENT	#	71	5698	
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1. Entity Name

INTERNATIONAL NAVAL RESEARCH ORGANIZATION, INC.



FILED Feb 10, 2003 8:00 am Secretary of State 02-10-2003 90217 038 ****61.25

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Store Remwood Dailye Store Remwood Dailye TOLEDO OH 43813 TOLEDO OH 43813 2. Principal Place of Business 3. Mailing Address Suile, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country 6. Name and Address of Current Registered Agent 7. Name and Address of Status Desired State Street Address of Current Registered Agent TRAWICK, HAMMERSLEY & VALENTINE, P.A. 2051 Mails NERET SarRASOTA FL 34237 Oity FLE NOW: FEE IS \$61.25 9. Election Campaign Financing Address of registered agent 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHAINGES TO OFFICER AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. Date Make Check P Inter Name Name Street Address TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHAINGES TO OFFICERS AND DIRECTORS 15. OFFICERS AND DIRECTORS 16. OFFICERS AND DIRECTORS 17. ADDITIONS/CHAINGES TO OFFICERS AND DIRECTORS 18.	HANGES
Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING C City & State City & State 4. FEI Number 34-1566095 Zip Country Zip Country 8. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent TRAWICK, HAMMERSLEY & VALENTINE,P.A. Street Address (P.O. Box Number is Net Acceptable) SARASOTA FL 34237 City FL 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Tam fam the obligations of registered agent. City FL 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Tam fam the obligations of registered agent. Oute FL SIGNATURE Street Address (P.O. Box Number is Net Acceptable) Dote FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. \$50.00 May Be Added to Fees Make Check P Florida Departm 10. OFFICERS AND DIFECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS INME ITLE PD HARRIS, ALLAN C ITLE NAME ITLE ADDESS ITLE NAME STREET ADDRESS ITLE	HANGES
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ITY-ST-ZIP CITY-ST-ZIP 2. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify the 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 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 Blochanged, or on an attachment with an address, with all other like empowered.	Change 🛄 Addition