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Jul 16 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **733344** (6)

1. Corporation Name

**RACAL-MILGO EMPLOYEE CLUB, INC.**

Principal Place of Business

Mailing Address

**1601 N HARRISON PKWY  
SUNRISE FL 33323**

**1601 N HARRISON PKWY  
SUNRISE FL 33323**



3. Date Incorporated or Qualified

**07/21/1975**

4. FEI Number

**59-1096875**

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CARPENTER, JOE  
1601 N. HARRISON PKWY.  
SUNRISE FL 33323-9899**

81

Name **JOE VALDEZ**

82

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

**1601 N HARRISON PKWY**

83

84

City **SUNRISE**

**FL**

85

Zip Code **33323**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>PD</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>BRONSON, DAN</b>	
STREET ADDRESS	<b>1601 N. HARRISON PKWY</b>	
CITY-ST-ZIP	<b>SUNRISE FL</b>	

TITLE	<b>VD</b>	<input type="checkbox"/> DELETE
NAME	<b>CHALMOWICZ, ELENA P</b>	
STREET ADDRESS	<b>1601 N HARRISON PKWY</b>	
CITY-ST-ZIP	<b>SUNRISE FL</b>	

TITLE	<b>D</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>LOHMEIER, JANE W</b>	
STREET ADDRESS	<b>1601 N HARRISON PKWY</b>	
CITY-ST-ZIP	<b>SUNRISE FL</b>	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>SRYA N.R.</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	<b>MEIGAN PUTNAM</b>	
1.3 STREET ADDRESS	<b>1601 N. HARRISON PKWY</b>	
1.4 CITY-ST-ZIP	<b>SUNRISE FL</b>	

2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		

3.1 TITLE	<b>Mgr. Employment</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	<b>JOE VALDEZ</b>	
3.3 STREET ADDRESS	<b>1601 N HARRISON PKWY</b>	
3.4 CITY-ST-ZIP	<b>SUNRISE FL 33323</b>	

4.1 TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	<b>MEIGAN PUTNAM</b>	
4.3 STREET ADDRESS	<b>1601 N. HARRISON PKWY</b>	
4.4 CITY-ST-ZIP	<b>SUNRISE FL 33323</b>	

5.1 TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	<b>JOE VALDEZ</b>	
5.3 STREET ADDRESS	<b>1601 N. HARRISON PKWY</b>	
5.4 CITY-ST-ZIP	<b>SUNRISE FL 33323</b>	

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 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 if changed, or on an attachment with an address.

SIGNATURE:

**JOE VALDEZ**

**4/14/98**

**9548464166**

CR2E037 (10/97)