## **2000 UNIFORM BUSINESS REPORT (UBR)**

## **FILED DOCUMENT # 738694** Jan 24, 2000 8:00 am 1. Entity Name **Secretary of State** 303RD BOMB GROUP (H) ASSOCIATION, INC. 01-24-2000 90022 045 \*\*\*\*70.00 Mailing Address Principal Place of Business 1428 GLENEAGLES DRIVE 1428 GLENEAGLES DRIVE VENICE FL 34292-4306 VENICE FL 34292 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FFI Number City & State 59-1938461 Not Applicable Country \$8.75 Additional Country 5. Certificate of Status Desired -Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) ROCHE, WILLIAM J 1428 GLENEAGLES DR VENICE FL 34292 Zip Code City 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 SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Change ☐ Addition TITLE ☐ Delete NAME NAME DEERFIELD. EDDIE STREET ADDRESS STREET ADDRESS 3552 LANDMARK TRAIL CITY-ST-ZIP CITY-ST-ZIP PALM HARBOR FL 34684 ☐ Change Addition TITLE TITLE Delete Delete S NAME SUSSKIND, HAROLD A. Dussliere, A.L. STREET ADDRESS STREET ADDRESS 2602 DEERFOOT TRAIL 1501 5th-St. CITY-ST-ZIP CITY-ST-ZIP <u>AUSTIN TX 787</u>04 <del>East Moline, Il 61244</del> X Delete X Change Addition TITLE TITLE NAME GOBRECHT, H D Gobrecht, H.D. STREET ADDRESS STREET ADDRESS 505 VIA DESEO 505 Via Deseo CITY-ST-ZIP CITY-ST-ZIP San Clemente, Ca92672 SAN CLEMENTE CA 92672 Change ☐ Addition X Delete TITLE TITLE NAME JOHNSON, RICHARD R. Johnson, Richard R. NAME STREET ADDRESS STREET ADORESS 5901 JOE ROAD 5901 Joe Road CITY-ST-ZIP CITY-ST-ZIP DEALE MD <u> Deale, Md. 20751-9739</u> Delete TITLE X Change ☐ Addition TITLE Roche, William J. NAME NAME ROCHE, WILLIAM J. 1428 Gleneagles Drive STREET ADDRESS STREET ADDRESS 1428 GLENEAGLES DR. Venice, Fl 34292-4306 CITY-ST-ZIP CITY-ST-ZIP VENICE FL 34292 ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME RENCHER, J STREET ADDRESS STREET ADDRESS PO BOX 7927 CITY-ST-ZIP CITY-ST-ZIP **BOISE ID 83707** 12. 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 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:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Description Phone #