2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Jan 14, 2005 8:00 am Secretary of State DOCUMENT # 738694 01-14-2005 90007 039 ****70.00 303RD BOMB GROUP (H) ASSOCIATION, INC. Principal Place of Business Mailing Address 3552 LANDMARK TRL. 50002586 3552 LANDMARK TRL PALM HARBOR, FL 34684-5016 US PALM HARBOR, FL 34684-5016 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01082005 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number 59-1938461 Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROCHE, WILLIAM J 3552 LANDMARK TRL. EDDIE DEERFIELD Stre 3552 LANDMARK TRAIL PALM HARBOR, FL: 34684 PALM HARBOR, FL 34684-5016 City Zip Code FL 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. . EDDIE DEERFIELD SIGNATURE (NOTE: Registered Agorn sequence of sired when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to 305 8 10° Due by May 1, 2005 Trust Fund Contribution: *** Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10... 11. TITLE nelete: TIT! E Change -- Addition NAME DUSSLIERE, ALBERT L NAME RICHARD BOWLER, JR. P. O. BOX 3126 1901 5TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **EAST MOLINE, IL 612442421 BURLINGTON, VT 05401-3126** CITY-ST-ZIP VPP ☐ Delete TITLE TITL F ☐ Change ☐ Addition DEERFIELD, EDDIE NAME NAME STREET ADDRESS 3552 LANDMARK TRL. STREET ADDRESS CITY-ST-ZIP PALM HARBOR, FL 346845016 CITY-ST-ZIP TITLE Delete ☐ Change ■ Addition NAME COX, WILLIAM H NAME STREET ADDRESS 441 SANDSTONE DR. STREET ADDRESS CITY-ST-72P VACAVILLE, CA 956884225 CITY-ST-7IP MLE TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS . Œ CITY-ST-ZIP CITY-ST-ZIP IIILE ☐ Delete IIILE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change - Addition NAME - -NAME ---STREET ADDRESS STREET ADDRESS 这种现在发现的激动地, 12. 条件 12 24 A 3 (e.s. 05.3 CITY-ST-ZIP 医海巴耳氏病 化原物原原物 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. **EDDIE DEERFIELD** (727)787-0332 11 Jan 2005

FILED

Daytime Phone #