

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757627

FILED
Jan 23, 2005
Secretary of State

Entity Name: GENERAL DANIEL "CHAPPIE" JAMES JR. CHAPTER, TUSKEGEE AIRMEN INC.

Current Principal Place of Business:

PATRICK AIR FORCE BASE
P.O.B. 254001
PATRICK AIR FORCE BASE, FL 32925

New Principal Place of Business:

PATRICK AIR FORCE BASE
P.O.B. 254001
PATRICK AIR FORCE BASE, FL 32925 US

Current Mailing Address:

PATRICK AIR FORCE BASE
P.O. BOX 254001
PATRICK AIR FORCE BASE, FL 32925

New Mailing Address:

PATRICK AIR FORCE BASE
P.O. BOX 254001
PATRICK AIR FORCE BASE, FL 32925 US

FEI Number: 59-2166856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRIS, NOEL R
200 SOUTH SYKES CREEK PKWY
UNIT #807
MERRITT ISLAND, FL 32952 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: 1VP () Delete
Name: WARD, SR., KIRKLAND W
Address: 7725 HORSE FERRY ROAD
City-St-Zip: ORLANDO, FL 32835 US

Title: 2VP () Delete
Name: DANIELS, SHEILA G
Address: 160 LEE AVENUE
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: TRES () Delete
Name: WESLEY, JAMES F
Address: 306 ESPANA COURT
City-St-Zip: SATELLITE BEACH, FL 32937

Title: SECT () Delete
Name: MERRELL, WILLIE C
Address: 823 HALLOWELL CIRCLE
City-St-Zip: ORLANDO, FL 32828 US

Title: HIST () Delete
Name: MANN, HIRAM E
Address: 1205 POLLYANNA DRIVE
City-St-Zip: TITUSVILLE, FL 32796 US

Title: PARL () Delete
Name: DECATUR, ROBERT A
Address: 7990 WINDOVER WAY
City-St-Zip: TITUSVILLE, FL 32780 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: 2VP (X) Change () Addition
Name: DANIELS, SHEILA G
Address: 1368 HAMPTON PARK LANE
City-St-Zip: MELBOURNE, FL 32940 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NOEL R. HARRIS

PRES

01/23/2005

Electronic Signature of Signing Officer or Director

Date