

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90017 041 ****61.25

DOCUMENT # 762295

1. Entity Name

339TH FIGHTER GROUP ASSOCIATION, INC.



Principal Place of Business

**19410 US HWY 41
LUTZ FL 33548
US**

Mailing Address

**C/O JAMES R. STARNES
P.O. BOX 251
LUTZ FL 33548-0251
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2176422

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**STARNES, JAMES R.
19410 U. S. HIGHWAY 41
LUTZ FL 33548**

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **TD** ☐ Delete
NAME **THIEME, RICHARD G**
STREET ADDRESS **2732 SOUTH SEVENTH STREET**
CITY-ST-ZIP **SHEBOYGAN WI 53081**

TITLE **SD** ☐ Delete
NAME **ANANIAN, STEPHEN**
STREET ADDRESS **4 N ORCHARD FARMS AVE**
CITY-ST-ZIP **SIMPSONVILLE SC 29681**

TITLE **PD** ☒ Delete
NAME **STEPHENSON, ENOCH B JR**
STREET ADDRESS **507 LOYOLA DRIVE**
CITY-ST-ZIP **NASHVILLE TN 37205**

TITLE **VD** ☒ Delete
NAME **SAMS, THOMAS G**
STREET ADDRESS **105 BOOT HILL**
CITY-ST-ZIP **HORSESHOE BAY TX 78657**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **POWELL, LAWRENCE J.**
STREET ADDRESS **17270 DEVONSHIRE ST.**
CITY-ST-ZIP **NORTHRIDGE, CA 91325**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Richard G Thieme

28 JAN 06 920-452-4780