

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90016 021 ****61.25

DOCUMENT # 763323 1. Entity Name BLUE ANGELS ASSOCIATION, INC.					
Principal Place of Business 425 MONTROSE BLVD. GULF BREEZE FL 32561 US			Mailing Address P O BOX 4705 PENSACOLA FL 32507-705 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2954078	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent BOOR, LEO J 425 MONTROSE BLVD. GULF BREEZE FL 32561				7. Name and Address of New Registered Agent 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 _____ DATE _____ Signature, Agent or Current Registered Agent must be signed and dated. (NOTE: Registered Agent signature is not used when filing.)					
FILE NOW: FEE IS \$61.25 Due By: May 1, 2008		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LESS, TONY 12418 CLIFTON HUNT DRIVE CLIFTON VA 20124	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BOOR, LEO J. 425 MONTROSE BLVD. GULF BREEZE FL 32561	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD MASLOWSKI, JAMES 608 HEATHLAND CROSSING HEATH TX 75032	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD CHATHAM, W.L. 64137 E. GREENBELT LANE TUCSON AZ 85739	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD RUD, GIL E 25753 VISTA ROAD HOLLYWOOD MD 20636	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD FOGG, J. R. 5423 DYNASTY DRIVE PENSACOLA FL 32504	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD WISELY, DENNIS 12010 N. 114TH WAY SCOTTSDALE AZ 85259	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD PEARSON, L 4531 E. OLIVE AVE. HIGLEY AZ 85236	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
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: <u>Leo J. Boor</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					