

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006261

FILED  
Jan 21, 2005  
Secretary of State

**Entity Name:** MILITARY SEA SERVICES MUSEUM, INC.

**Current Principal Place of Business:**

1402 ROSELAND AVENUE  
SEBRING, FL 33870

**New Principal Place of Business:**

**Current Mailing Address:**

1402 ROSELAND AVENUE  
SEBRING, FL 33870

**New Mailing Address:**

**FEI Number:** 65-0867157

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RHOADES, CLIFFORD R  
227 NORTH RIDGEWOOD DRIVE  
SEBRING, FL 33870 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: D ( ) Delete  
Name: CHAPMAN, LOYD W  
Address: 202 CLARA STREET  
City-St-Zip: SEBRING, FL 33872

Title: D ( ) Delete  
Name: FLEETWOOD, HOWARD A  
Address: 4116 DUFFER LOOP  
City-St-Zip: SEBRING, FL 33872

Title: D ( ) Delete  
Name: GLADUE, GEORGE A  
Address: 1501 RANDALL ROAD  
City-St-Zip: SEBRING, FL 33872

Title: D ( ) Delete  
Name: LAMORTE, ANTHONY E SR.  
Address: 4205 APPALOOSA ROAD  
City-St-Zip: SEBRING, FL 33872

Title: D ( ) Delete  
Name: SMITH, GEORGE R  
Address: 3116 DEVON COURT  
City-St-Zip: SEBRING, FL 33870

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: 0 (X) Change ( ) Addition  
Name: FLEETWOOD, HOWARD A  
Address: 4116 DUFFER LOOP  
City-St-Zip: SEBRING, FL 33872

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: H.A. FLEETWOOD

PRES

01/21/2005

Electronic Signature of Signing Officer or Director

Date