

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000816

FILED
Jan 16, 2009
Secretary of State

Entity Name: THE USS AMERICA MUSEUM FOUNDATION, INC.

Current Principal Place of Business:

10623 SE 142 AVE RD
OCKLAWAHA, FL 32179

New Principal Place of Business:

Current Mailing Address:

10623 SE 142 AVE RD
OCKLAWAHA, FL 32179

New Mailing Address:

FEI Number: 38-3642663

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAZOULAS, JOHN
10623 SE 142 AVE RD
OCKLAWAHA, FL 32179 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: PTD () Delete
Name: MCNULTY, LEE
Address: 10 SUMMIT AVENUE
City-St-Zip: BUTLER, NJ 07405

Title: VD () Delete
Name: DIANO, STEVE
Address: 2022 W VERMONT AVE
City-St-Zip: PHOENIX, AZ 85015

Title: SD () Delete
Name: VAZOULAS, JOHN
Address: 10623 SE 142ND AVENUE ROAD
City-St-Zip: OCKLAWAHA, FL 32179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 exemption stated in Chapter 119, 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: LEE E MCNULTY

PTD

01/16/2009

Electronic Signature of Signing Officer or Director

Date