

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 13 AM 11:09

DOCUMENT # N02167 (7)

1. Corporation Name

ROCKET CITY R/C CLUB OF FLORIDA, INC.

Principal Place of Business

1823 WEST FALL DR.
ORLANDO FL 32817
US

Mailing Address

1823 WEST FALL DR.
ORLANDO FL 32817
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/23/1984

3a. Date of Last Report
03/04/1994

4. FEI Number
59-2429401

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$0.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 3066 Autumn CT.

26 3066 Autumn CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 Winter Park FL

28 Winter Park FL

Zip Country

Zip Country

24 32792

29 32792

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BISHOP, WILLIAM D
1923 WEST FALL DR.
ORLANDO FL 32817

81 Name

JOSEPH HARDY

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

3066 Autumn CT

83

84 City

Winter Park FL

85 Zip Code
32792

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the conditions of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

2/16/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME BISHOP, WILLIAM D
STREET ADDRESS 1923 WEST FALL DR.
CITY-ST-ZIP ORLANDO FL

1.1 TITLE P/D
1.2 NAME JOSEPH HARDY
1.3 STREET ADDRESS 3066 Autumn CT
1.4 CITY-ST-ZIP Winter Park FL 32792 ☒ Change ☐ Addition

TITLE VP/D
NAME RICH, PETE
STREET ADDRESS 528 ANDES AVE
CITY-ST-ZIP ORLANDO FL

2.1 TITLE VP/D
2.2 NAME Pete Rich
2.3 STREET ADDRESS 528 ANDES AVE
2.4 CITY-ST-ZIP Orlando FL. ☒ Change ☐ Addition

TITLE S/D
NAME BELL, GEORGE
STREET ADDRESS 9283 LAKE SHARP CT.
CITY-ST-ZIP ORLANDO FL

3.1 TITLE S/D
3.2 NAME George Bell
3.3 STREET ADDRESS 9283 Lake Sharp Ct.
3.4 CITY-ST-ZIP Orlando FL. ☒ Change ☐ Addition

TITLE T/D
NAME GOPLEN, ROBERT
STREET ADDRESS 218 SILAS PHELPS CT.
CITY-ST-ZIP ORLANDO FL

4.1 TITLE T/D
4.2 NAME Robert Goplin
4.3 STREET ADDRESS 218 Silas Phelps Ct.
4.4 CITY-ST-ZIP Orlando, FL. ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSEPH HARDY

2/16/95 462 679 1911

Daytime (Area #)