

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010234

**FILED**  
**Jan 22, 2008**  
**Secretary of State**

**Entity Name:** FLYING EAGLES RADIO CONTROL CLUB, INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

MELVIN TUBO  
14386 DALIA AVE  
FT PIERCE, FL 34951

**Current Mailing Address:**

**New Mailing Address:**

MELVIN TUBO  
14386 DALIA AVE  
FT PIERCE, FL 34951

**FEI Number:** 20-1820403      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

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

TUBO, MELVIN  
14386 DALIA AVE  
FT PIERCE, FL 34951    US

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:**

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

Title:      DIR                ( ) Delete  
Name:      OLIVER, DAVID  
Address:    5815 SHANNON DRIVE  
City-St-Zip: FORT PIERCE, FL 34951

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

Title:      DIR                ( ) Delete  
Name:      TUBO, MEL  
Address:    14386 DALIA AVE  
City-St-Zip: FT PIERCE, FL 34951

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

Title:      DIR                ( ) Delete  
Name:      DIXION, WALT  
Address:    6438 ALEMENDRA ST  
City-St-Zip: FT. PIERCE, FL 34951

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: MEL TUBO

SEC.

01/22/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date