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**May 10, 1999 8:00 am**
**Secretary of State**
05-10-1999 90086 022 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT
**1999**

FLORIDA DEPARTMENT OF STATE
**Katherine Harris**
Secretary of State
DIVISION OF CORPORATIONS

530104 - 90086 - 22

DOCUMENT # N04251

1. Corporation Name
**ASTRONAUT SCHOLARSHIP FOUNDATION, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| 6225 VECTOR SPACE BLVD.<br>TITUSVILLE FL 32780<br>US | 13513 BUCKHORN RUN COURT<br>ORLANDO FL 32837<br>US |

| 2. Principal Place of Business | 2a. Mailing Address | 3. Date Incorporated or Qualifed |
|---|---|---|
| 21 | 26 | 07/19/1984 |
| Suite, Apt. #, etc. 22 | Suite, Apt. #, etc. 27 | 4. FEI Number 59-2448775 ☐ Applied For ☐ Not Applicable |
| City & State 23 | City & State 28 | 5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required |
| Zip 24 Country 25 | Zip 29 Country 30 | 6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees |

**9. Name and Address of Current Registered Agent**

CASSARA, MICHAEL D JR
13351 STATE RD 535
ORLANDO FL 32821

**10. *Name and Address of New Registered Agent***

81 Name

82 Street Address (P.O. Box Number is Not Acceptable) 13513 BUCKHORN RUN CT

83

84 City ORLANDO FL 85 Zip Code 32837

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|---|
| TITLE | PC | ☐ DELETE | 1.1 TITLE | ☐ Change ☐ Addition |
| NAME | LOVELL, JAMES A | | 1.2 NAME | |
| STREET ADDRESS | 1090 TURICUM RD | | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | LAKE FORREST IL 60045 | | 1.4 CITY-ST-ZIP | |
| TITLE | D | ☐ DELETE | 2.1 TITLE | ☐ Change ☐ Addition |
| NAME | LANDWIRTH, HENRI | | 2.2 NAME | |
| STREET ADDRESS | 13351 STATE RD 535 | | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | ORLANDO FL | | 2.4 CITY-ST-ZIP | |
| TITLE | D | ☐ DELETE | 3.1 TITLE | ☐ Change ☐ Addition |
| NAME | GLENN, SENATOR JOHN | | 3.2 NAME | |
| STREET ADDRESS | 8710 BELMART RD | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | POTOMAC MD | | 3.4 CITY-ST-ZIP | |
| TITLE | ST | ☐ DELETE | 4.1 TITLE | ☐ Change ☐ Addition |
| NAME | CASSARA, MICHAEL D | | 4.2 NAME | |
| STREET ADDRESS | 13351 STATE RD 535 | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | ORLANDO FL | | 4.4 CITY-ST-ZIP | |
| TITLE | D | ☐ DELETE | 5.1 TITLE | ☐ Change ☐ Addition |
| NAME | GRISSOM, MRS. BETTY | | 5.2 NAME | |
| STREET ADDRESS | 7513 OLYMPIA | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | HOUSTON TX | | 5.4 CITY-ST-ZIP | |
| TITLE | D | ☒ DELETE | 6.1 TITLE | ☐ Change ☐ Addition |
| NAME | SHEPARD, ALAN | | 6.2 NAME | |
| STREET ADDRESS | 13513 BUCKHORN RUN CT | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | ORLANDO FL 32837 | | 6.4 CITY-ST-ZIP | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** SIGNATURE REQUIRED 4/30/99 407-387-5437
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)