

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N04251

1. Entity Name

ASTRONAUT SCHOLARSHIP FOUNDATION, INC.

FILED

Apr 09, 2001 8:00 am
Secretary of State

04-09-2001 90025 002 ****61.25

Principal Place of Business

6225 VECTOR SPACE BLVD.
TITUSVILLE FL 32780
US

Mailing Address

13513 BUCKHORN RUN COURT
ORLANDO FL 32837
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2448775

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CASSARA, MICHAEL D JR
13513 BUCKHORN RUN CT
ORLANDO FL 32837

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PC
LOVELL, JAMES A
1090 TURICUM RD
LAKE FORREST IL 60045 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LANDWIRTH, HENRI
13351 STATE RD 535
ORLANDO FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GLENN, SENATOR JOHN
8710 BELMART RD
POTOMAC MD ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
CASSARA, MICHAEL D
13351 STATE RD 535
ORLANDO FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GRISSOM, MRS. BETTY
7513 OLYMPIA
HOUSTON TX ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VICE CHAIRMAN
OWEN K. GARRIOTT
111 LOST TREE DRIVE
HUNTSVILLE, AL 35824 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice Chairman
Owen K Garriott
111 Lost Tree Dr.
Huntsville AL 35824 ☐ Change ☒ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/5/01 407-387-1801

CR2E037 (10/00)