

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008034

FILED
May 06, 2009
Secretary of State

Entity Name: SOUTHEAST AVIATION MILITARY MUSEUM, INC.

Current Principal Place of Business:

1784 NEW LENOX LANE
DUNNELLON, FL 34430

New Principal Place of Business:

Current Mailing Address:

PO BOX 3426
DUNNELLON, FL 34430

New Mailing Address:

FEI Number: 20-3330782 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MACK, RICHARD P
10159 SW 192ND CIRCLE
DUNNELLON, FL 34432 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:

Title: DP () Delete
Name: SHAY, RUSSELL
Address: 9375 SW 208 CIRCLE
City-St-Zip: DUNNELLON, FL 34431

Title: DV () Delete
Name: GAMPP, JOHN
Address: 47 OAK AVENUE
City-St-Zip: INGLIS, FL 34449

Title: DT () Delete
Name: MACK, RICHARD P
Address: 10189 SW 192ND CIRCLE
City-St-Zip: DUNNELLON, FL 34432

Title: SD () Delete
Name: MINK, PAUL
Address: 2063 TYNTE TERRACE
City-St-Zip: THE VILLAGES, FL 32162

Title: D () Delete
Name: FOWLER, ROBERT
Address: 10064 SW 182ND COURT
City-St-Zip: DUNNELLON, FL 34432

Title: D () Delete
Name: SPEIDEL, SID
Address: 20 VINUNRUM COURT
City-St-Zip: HOMASASSA, FL 34446

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:

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: RICHARD P. MACK

DT

05/06/2009

Electronic Signature of Signing Officer or Director

Date