

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 30, 2008 8:00 am
Secretary of State

01-30-2008 90037 003 ****61.25

DOCUMENT # N09319

1. Entity Name

**SOUTH FLORIDA CHAPTER, MILITARY OFFICERS
ASSOCIATION (MOA), INC.**



Principal Place of Business

P.O. BOX 245
SEBRING FL 33871-7245

Mailing Address

P.O. BOX 245
SEBRING FL 33871-7245



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2456105

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/07)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WHITTON, ROY P
101 TEMPTATION COURT
LAKE PLACID FL 33852**

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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

Roy P. Whitton

Roy P. Whitton

24 Jan 08

FILE NOW: FEE IS \$61.25

Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **VD** ☐ Delete
NAME **JOHNSON, WARREN**
STREET ADDRESS **4310 LAKEVIEW DRIVE**
CITY-STATE-ZIP **SEBRING FL 33870**

TITLE **SD** ☐ Delete
NAME **RORHMAN, TORSEN**
STREET ADDRESS **514 BEAR RD**
CITY-STATE-ZIP **LAKE PLACID FL 33852**

TITLE **TD** ☐ Delete
NAME **BROUGH, LOUIS**
STREET ADDRESS **10809 US 27 S #71**
CITY-STATE-ZIP **SEBRING FL 33876-9503**

TITLE **TD** ☐ Delete
NAME **LAKELAND, MABEL S**
STREET ADDRESS **5224 POINTE EAST**
CITY-STATE-ZIP **SEBRING FL 33872-3424**

TITLE **TD** ☒ Delete
NAME **CHRISTMAN, JANE S**
STREET ADDRESS **223 HILLCREST DR**
CITY-STATE-ZIP **LAKE PLACID FL 33852-9261**

TITLE **P** ☐ Delete
NAME **WHITTON, ROY P**
STREET ADDRESS **101 TEMPTATION CT**
CITY-STATE-ZIP **LAKE PLACID FL 33852-6130**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

TITLE ☐ Change ☒ Addition
NAME **TD**
STREET ADDRESS **Felt, June**
CITY-STATE-ZIP **131 Seminole Rd, Babson Park, FL 33827**

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Roy P. Whitton

Roy P. Whitton

24 Jan 08 (863) 465-7048