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NONPROFIT CORPORATION ANNUAL REPORT
1999

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

DOCUMENT # **N09460**

1. Corporation Name

503RD PARACHUTE REGIMENTAL COMBAT TEAM ASSOCIATION, WORLD WAR II, INC.

Principal Place of Business	Mailing Address
1123 DAIMLER DR APOPKA FL 32712 US	1123 DAIMLER DR APOPKA FL 32712 US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
34 GARDEN MALL CT.	26 34 GARDEN MALL CT.	05/24/1985
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number 59-2536280 ☐ Applied For ☐ Not Applicable
	27	
City & State: INGLIS, FL.	City & State: 28 INGLIS, FL.	5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
Zip: 34449 25 Country: U.S.	Zip: 29 34449 30 Country: U.S.	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

LINTON, MAURICE S.
1123 DAIMLER DRIVE
APOPKA FL 32712

10. Name and Address of New Registered Agent

81 Name: CHARLES E. BREIT
82 Street Address (P.O. Box Number is Not Acceptable): 34 GARDEN MALL CT.
83
84 City: INGLIS FL 85 Zip Code: 34449

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 617.0508, Florida Statutes.

SIGNATURE: CHARLES E. BREIT - (BUDGET DIRECTOR) Charles E. Breit 1-10-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE	P/C/D	☐ Change ☒ Addition
NAME	REYNOLDS, JOHN D		1.2 NAME	REYNOLDS JOHN D.	
STREET ADDRESS	718 TOWN CENTER DR		1.3 STREET ADDRESS	718 TOWN CENTER DR.	
CITY-ST-ZIP	JOPPA MD 21085		1.4 CITY-ST-ZIP	JOPPA MD 21085	
TITLE	VPD	☒ DELETE	2.1 TITLE	S/D	☒ Change ☐ Addition
NAME	REYNOLDS, JOHN D		2.2 NAME	FLYNN ROBERT J.	
STREET ADDRESS	718 TOWNE CENTER DRIVE		2.3 STREET ADDRESS	1302 MARLBROOK LANE	
CITY-ST-ZIP	JOPPA MD 21085		2.4 CITY-ST-ZIP	LANSDALE, PA. 19446	
TITLE	STD	☒ DELETE	3.1 TITLE	T/D	☒ Change ☐ Addition
NAME	LINTON, MAURICE S		3.2 NAME	HEIN JOHN	
STREET ADDRESS	1123 DAIMLER DRIVE		3.3 STREET ADDRESS	13011 COLLINGWOOD TERR	
CITY-ST-ZIP	APOPKA FL 32712		3.4 CITY-ST-ZIP	SILVER SPRING, MD. 20904	
TITLE	RD	☒ DELETE	4.1 TITLE	D	☐ Change ☒ Addition
NAME	LINTON, MARGEE N		4.2 NAME	BREIT CHARLES E.	
STREET ADDRESS	1123 DAIMLER DRIVE		4.3 STREET ADDRESS	34 GARDEN MALL CT.	
CITY-ST-ZIP	APOPKA FL 32712		4.4 CITY-ST-ZIP	INGLIS, FL. 34449	
TITLE	VPD	☐ DELETE	5.1 TITLE	V/D	☐ Change ☐ Addition
NAME	MANZ, WILLIAM A		5.2 NAME	MANZ WILLIAM A.	
STREET ADDRESS	1785 BARNES MILL RD		5.3 STREET ADDRESS	1785 BARNES MILL RD.	
CITY-ST-ZIP	RICHMOND KY 40475		5.4 CITY-ST-ZIP	RICHMOND KY 40475	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (11/98)

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: Charles E. Breit SIGNATURE REQUIRED CHARLES E. BREIT 1-10-99 (352)447-3983