

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90126 037 ****61.25

DOCUMENT # N09460

1. Entity Name

**503RD PARACHUTE REGIMENTAL COMBAT TEAM ASSOCIATI
 ON, WORLD WAR II, INC.**

Principal Place of Business

Mailing Address

**1123 DAIMLER DRIVE
 APOPKA FL 32712
 US**

**1123 DAIMLER DRIVE
 APOPKA FL 32712
 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

59-2536280

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

**LINTON, MAURICE S.
 1123 DAIMLER DRIVE
 APOPKA FL 32712**

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 Maurice S Linton **MAURICE S LINTON** **04-30-02**
 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 **PCD** ☒ Delete
 NAME **MANZ, WILLIAM A**
 STREET ADDRESS **1785 BARNES MILL RD**
 CITY-ST-ZIP **RICHMOND KY 40475**

TITLE **PRES** ☒ Change ☐ Addition
 NAME **Francis X O'Neill**
 STREET ADDRESS **98 Henry's Rd**
 CITY-ST-ZIP **Brewater, MA 02631**

TITLE **VPD** ☒ Delete
 NAME **ONEILL, FRANK**
 STREET ADDRESS **98 HENRYS RD**
 CITY-ST-ZIP **BREWSTER MA 02631**

TITLE **Past Pres** ☒ Change ☐ Addition
 NAME **William A. Manz**
 STREET ADDRESS **1785 Barnes Mill Rd**
 CITY-ST-ZIP **Richmond, KY 40475**

TITLE **D** ☒ Delete
 NAME **REYNOLDS, JOHN D**
 STREET ADDRESS **718 TOWNE CENTER DR**
 CITY-ST-ZIP **JOPPA MD 21085**

TITLE **VP** ☐ Change ☒ Addition
 NAME **John Pittenger**
 STREET ADDRESS **2117-B Via Puerta**
 CITY-ST-ZIP **Laguna Woods, CA 92653**

TITLE **SD** ☒ Delete
 NAME **FLYNN, ROBERT J**
 STREET ADDRESS **1302 MARLBROOK LA**
 CITY-ST-ZIP **LANSDALE PA 19446**

TITLE **SEC** ☐ Change ☒ Addition
 NAME **Maurice S. Linton**
 STREET ADDRESS **1123 Daimler Dr**
 CITY-ST-ZIP **Apopka, FL 32712**

TITLE **T** ☒ Delete
 NAME **HEIN, JOHN**
 STREET ADDRESS **13011 COLLINWOOD TERRACE**
 CITY-ST-ZIP **SILVER SPRING MD 20904**

TITLE **Recording Secretary** ☐ Change ☒ Addition
 NAME **Margee N. Linton**
 STREET ADDRESS **1123 Daimler Dr**
 CITY-ST-ZIP **Apopka, FL 32712**

TITLE **BD** ☒ Delete
 NAME **MILLIEAN, FITZHUGH R**
 STREET ADDRESS **2114 CRILL AVENUE**
 CITY-ST-ZIP **PALATKA FL 32177**

TITLE **BD** ☐ Change ☒ Addition
 NAME **John Pittenger**
 STREET ADDRESS **2117-B Via Puerta**
 CITY-ST-ZIP **Laguna Woods, CA 92653**

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: Maurice S Linton **MAURICE S LINTON** **04-30-02**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)