

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90091 013 ****61.25

DOCUMENT # N09460

1. Entity Name

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



Principal Place of Business

518 ONE CENTER BLVD.
APT 112
ALTAMONTE SPRINGS FL 32701
US

Mailing Address

518 ONE CENTER BLVD.
APT 112
ALTAMONTE SPRINGS FL 32701
US



2. Principal Place of Business

34 GARDEN MALL CT.
Suite, Apt. #, etc.

3. Mailing Address

34 GARDEN MALL CT.
Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/05)

City & State

INGLIS, FL.

City & State

INGLIS, FL.

4. FEI Number

59-2536280

Applied For

Not Applicable

Zip

34449

Country

USA

Zip

34449

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LINTON, MAURICE S.
518 ONE CENTER BLVD.
APT 112
ALTAMONTE SPRINGS FL 32701

7. Name and Address of New Registered Agent

Name CHARLES E. BREIT

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

34 GARDEN MALL CT.

City INGLIS

FL

Zip Code 34449

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

Charles E. Breit - PRESIDENT

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
Due By May 1, 2006

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 P ☒ Delete
NAME PITENGER, JACK L.
STREET ADDRESS 2117 VIA PUERTO #B
CITY-ST-ZIP LAGUNA HILLS CA 92653

TITLE VP ☒ Delete
NAME FLYNN, ROBERT J
STREET ADDRESS 1302 MARLBROOK LANE
CITY-ST-ZIP LANSDALE PA 19446

TITLE RST ☒ Delete
NAME LINTON, MARGE N
STREET ADDRESS 518 ONE CENTER BLVD. APT. 112
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701-2234

TITLE ST ☒ Delete
NAME LINTON, MAURICE S
STREET ADDRESS 518 ONE CENTER BLVD. APT. 108
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701

TITLE D ☐ Delete
NAME LYLE, KENNETH G
STREET ADDRESS 1944 DETWILLER RD BOX 72
CITY-ST-ZIP CEDARS PA 19423

TITLE D ☐ Delete
NAME LLEWELLYN, RALPH E DDS
STREET ADDRESS 210 N HUNT ST
CITY-ST-ZIP TERRE HAUTE IN 47803

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Change ☒ Addition
NAME CHARLES E. BREIT
STREET ADDRESS 34 GARDEN MALL CT.
CITY-ST-ZIP INGLIS, FL. 34449

TITLE ST ☒ Change ☐ Addition
NAME JACK L. PITENGER
STREET ADDRESS 2117 VIA PUERTO #B
CITY-ST-ZIP LAGUNA HILLS, CA 92653

TITLE D ☒ Change ☐ Addition
NAME MAURICE S. LINTON
STREET ADDRESS 518 ONE CENTER BLVD. APT. 112
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32701-2234

TITLE D ☒ Change ☐ Addition
NAME KENNETH G. LYLE
STREET ADDRESS 1944 DETWILLER RD. BOX 72
CITY-ST-ZIP CEDARS, PA. 19423

TITLE D ☒ Change ☐ Addition
NAME RALPH E. LLEWELLYN DDS.
STREET ADDRESS 210 N. HUNT ST.
CITY-ST-ZIP TERRE HAUTE, IN 47803

TITLE D ☐ Change ☒ Addition
NAME DUANE DAVIS
STREET ADDRESS 1856 GUTHRIE RD.
CITY-ST-ZIP MANISTEE, MI. 49660-9705

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:

Charles E. Breit

CHARLES E. BREIT