2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2004 8:00 am
Secretary of State
07-12-2004 90026 002 ****61.25

DOCUMENT # N12515

1. Entity Name
THE MAYPORT CHAPTER (MOAA), INC.

54061700

Principal Place of Business	Mailing Address
PO BOX 330791 ATLANTIC BCH, FL 32233-0791 US	PO BOX 330791 ATLANTIC BCH, FL 32233-0791 US

07062004 Chg-NP CR2E037 (10/03)

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 59-2132891 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PHILLIPS, ROBERT G
230 30TH AVE S
JACKSONVILLE BEACH, FL 32250-6037

7. Name and Address of New Registered Agent

Name: Judas, Robert A.
Street Address (P.O. Box Number is Not Acceptable): 2310 Oceanforest Drive West
City: Atlantic Beach FL Zip Code: 32233-6611

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: Robert A Judas 7/10/04
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by September 8, 2004

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PVPD DUNLOP, JAMES M 1007 MARVONE LANE NEPTUNE BEACH, FL 322663515	☑ Delete	President (P/D) James M. Dunne P.O. Box 41282 Jacksonville FL 32241-7282	☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD BERLEY, FRED 1934 DEER RUN TRAIL JACKSONVILLE, FL 322467269	☐ Delete	12427 Mt Pleasant Woods Dr. Jacksonville FL 32225-2679	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD TAPPIN, F. DONALD 3375 ZEPHYR WAY N JACKSONVILLE BEACH, FL 322503007	☑ Delete	Secretary (S/D) Robert R. Bachmann 9227 Jaybird Cir E. Jacksonville, FL 32257-5276	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PHILLIPS, ROBERT G 230 30TH AVE. SOUTH JACKSONVILLE BEACH, FL 322506037	☑ Delete	Treasurer (T/D) Robert A. Judas 2310 Oceanforest Drive West Atlantic Beach FL 32233-6611	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROBINSON, GLORIA 13682 PICARSA DRIVE JACKSONVILLE, FL 322253262	☑ Delete	Director (D) Mary Ellen Sigler 4528 Middleton Park Cir W. Jacksonville, FL 32224-6612	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PEARCE, PATRICIA H 6638 NIGHTINGALE ROADS JACKSONVILLE, FL 322162647	☐ Delete		☐ Change ☐ Addition

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: Mary Ellen Sigler Director
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #