

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N12515

FILED
Sep 17, 2003
Secretary of State

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

Current Principal Place of Business:

PO BOX 330791
ATLANTIC BCH, FL 322330791 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 330791
ATLANTIC BCH, FL 322330791 US

New Mailing Address:

FEI Number: 59-2132891

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIPS, ROBERT G
230 30TH AVE S
JACKSONVILLE BEACH, FL 322506037 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PVPD () Delete
Name: DUNLOP, JAMES M
Address: 1007 MARVONE LANE
City-St-Zip: NEPTUNE BEACH, FL 322663515 US

Title: VPD () Delete
Name: BERLEY, FRED
Address: 1934 DEER RUN TRAIL
City-St-Zip: JACKSONVILLE, FL 322467269 US

Title: SD () Delete
Name: TAPPIN, F. DONALD
Address: 3375 ZEPHYR WAY N
City-St-Zip: JACKSONVILLE BEACH, FL 322503007 US

Title: TD () Delete
Name: PHILLIPS, ROBERT G
Address: 230 30TH AVE. SOUTH
City-St-Zip: JACKSONVILLE BEACH, FL 322506037 US

Title: D () Delete
Name: ROBINSON, GLORIA
Address: 13682 PICARSA DRIVE
City-St-Zip: JACKSONVILLE, FL 322253262 US

Title: D () Delete
Name: PEARCE, PATRICIA H
Address: 6638 NIGHTINGALE ROADS
City-St-Zip: JACKSONVILLE, FL 322162647 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT G. PHILLIPS

TD

09/17/2003

Electronic Signature of Signing Officer or Director

Date