

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14764

FILED
Jun 23, 2009
Secretary of State

Entity Name: SPACE COAST-INDIAN RIVER CHAPTER, NO. 170, THE MILITARY ORDER OF THE WORLD WARS, INC.

Current Principal Place of Business:

P O BOX 254835
PATRICK AFB, FL 329250835 US

New Principal Place of Business:

605 N. RAMONA AVE
INDIALANTIC, FL 32903 US

Current Mailing Address:

P O BOX 254835
PATRICK AFB, FL 329250835 US

New Mailing Address:

605 N. RAMONA AVE
INDIALANTIC, FL 32903 US

FEI Number: 59-2097359 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ADAMS, HENRY A
605 N RAMONA AVE
INDIALANTIC, FL 32903 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: D () Delete
Name: QUISENBERRY, WILLIAM
Address: 4040 ESTANCIA WAY
City-St-Zip: MELBOURNE, FL 32934

Title: TD () Delete
Name: ADAMS, HENRY A
Address: 605 N RAMONA AVE
City-St-Zip: INDIALANTIC, FL 32903

Title: S () Delete
Name: ADAMS, KATHERINE R
Address: 605 N RAMONA AVE
City-St-Zip: INDIALANTIC, FL 32903

Title: D () Delete
Name: LAWRENCE, PAUL B
Address: 555 WEST GATEWAY CT
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D () Delete
Name: MURPY, JOHN T
Address: 207 GLENGARRY AVE
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: PD () Delete
Name: PETTENGILL, JR, HOWARD W
Address: 2015 CANTERBURY DRIVE
City-St-Zip: INDIALANTIC, FL 32903

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
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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 exemption stated in Chapter 119, 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: HENRY A. ADAMS

T/D

06/23/2009

Electronic Signature of Signing Officer or Director

Date