

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15614

FILED
Apr 08, 2006
Secretary of State

Entity Name: FLAGLER COUNTY CHAPTER, MILITARY OFFICERS ASSOCIATION OF AMERICA, INC.

Current Principal Place of Business:

PO BOX 352495
PALM COAST, FL 321352495 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 352495
PALM COAST, FL 321352495 US

New Mailing Address:

FEI Number: 59-2680228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCOPPIN, NEAL R
17 PATUXENT LN.
PALM COAST, FL 32164 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: PD () Delete
Name: JONES, BILLY
Address: 3 ERIE PL
City-St-Zip: PALM COAST, FL 32164

Title: VD () Delete
Name: POLLARD, RICHARD
Address: 15 CONWAY CT.
City-St-Zip: PALM COAST, FL 32137

Title: VD () Delete
Name: LEWIS, RICHARD
Address: 18 CEDAR POINT DR
City-St-Zip: PALM COAST, FL 32164

Title: SD () Delete
Name: HOSKINS, DONALD M
Address: 2 LANTARACE DR
City-St-Zip: PALM COAST, FL 32137

Title: TD () Delete
Name: BEY, ROBERT
Address: 2 CLEVELAND CT
City-St-Zip: PALM COAST, FL 32137

Title: D () Delete
Name: CRUZ, JOSE
Address: 22 LUDLOW LANE
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VD (X) Change () Addition
Name: BERTISH, GEORGE
Address: 52 KALAMAZOO TRAIL
City-St-Zip: PALM COAST, FL 32164

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

Title: TD (X) Change () Addition
Name: LEWIS, RICHARD
Address: 18 CEDAR POINT DRIVE
City-St-Zip: PALM COAST, FL 32164

Title: D (X) Change () Addition
Name: BEY, ROBERT
Address: 3 CLEVELAND COURT
City-St-Zip: PALM COAST, FL 32137

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD LEWIS

TD

04/08/2006

Electronic Signature of Signing Officer or Director

Date