2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2008
Secretary of State

DOCUMENT# N15614

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

Current Principal Place of Business:

3 ERIC PLACE
PALM COAST, FL 32164 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:

JONES, BILLY G
3 ERIC PLACE
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:	BEAUCHAMP, THOMAS	
Address:	51 ST. ANDREWS COURT	
City-St-Zip:	PALM COAST, FL 32137	
Title:	VD	( ) Delete
Name:	BERTISH, GEORGE	
Address:	64 KALAMAZOO TRAIL	
City-St-Zip:	PALM COAST, FL 32164	
Title:	D	( ) Delete
Name:	WALLER, JAMES	
Address:	7 WILLOUGHBY PL	
City-St-Zip:	PALM COAST, FL 32164	
Title:	SD	( ) Delete
Name:	ROSS, JOSEPH	
Address:	2 WESTLYN PL.	
City-St-Zip:	PALM COAST, FL 32164	
Title:	TD	( ) Delete
Name:	LEWIS, RICHARD	
Address:	18 CEDAR POINT DRIVE	
City-St-Zip:	PALM COAST, FL 32164	
Title:	D	( ) Delete
Name:	PEREZ, CONNIE	
Address:	21 WOODFAIR LN.	
City-St-Zip:	PALM COAST, FL 32164	

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:	SD	(X) Change ( ) Addition
Name:	BEAUCHAMP, BOBBE	
Address:	51 ST ANDREWA COURT	
City-St-Zip:	PALM COAST, FL 32137	
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: RICHARD LEWIS TD 04/04/2008

Electronic Signature of Signing Officer or Director — Date