

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 14, 2006 8:00 am
Secretary of State

03-14-2006 90018 031 ****69.00

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1. Entity Name

FLAGLER COUNTY RADIO AERO MODELERS, INC.



Principal Place of Business

32 BRISTOL DR
PALM COAST FL 32137

Mailing Address

P O BOX 403
BUNNELL FL 32110
US

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

59-2752674

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GORDON, KEN
700 E PALM ST
(P O BOX 403)
BUNNELL FL 32110

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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

TITLE P
NAME BYRNE, RICHARD ☒ Delete
STREET ADDRESS 111 HAMMERSHAM DR
CITY-ST-ZIP FLAGLER BEACH FL 32136

TITLE VP
NAME GOULD, MICHAEL E ☒ Delete
STREET ADDRESS 7 BRISTOL COURT
CITY-ST-ZIP PALM COAST FL 32137

TITLE SD
NAME GORDON, KEN ☐ Delete
STREET ADDRESS 700 E PALM ST
CITY-ST-ZIP BUNNELL FL 32110

TITLE TD
NAME DANIALS, RICHARD H ☐ Delete
STREET ADDRESS 100 FORSYTH LN
CITY-ST-ZIP PALM COAST FL 32137

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☒ Change ☐ Addition
NAME Robert Thierwechter
STREET ADDRESS 24 Clarendon Ct N
CITY-ST-ZIP Palm Coast FL 32137

TITLE V.P. ☒ Change ☐ Addition
NAME James McClellan
STREET ADDRESS 57 Shinnecock Dr.
CITY-ST-ZIP Palm Coast FL 32137

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Kenneth S. Gordon* 20 Feb 06 386430-3030