

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17944

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** FLAGLER COUNTY RADIO AERO MODELERS, INC.

**Current Principal Place of Business:**

33 KINGFISHER LANE  
PALM COAST, FL 32137

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 353773  
PALM COAST, FL 32135 US

**New Mailing Address:**

**FEI Number:** 59-2752674      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MANNO, EUGENE  
33 KINGFISHER LANE  
PALM COAST, FL 32137 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: P  
Name: THIERWECHTER, ROBERT  
Address: 24 CLARENDON CT. N  
City-St-Zip: PALM COAST, FL 32137

Title: VP  
Name: FABIAN, RICHARD  
Address: 29 CLARENDON CT. N.  
City-St-Zip: PALM COAST, FL 32137

Title: SD  
Name: SEIFERHELD, DENNIS  
Address: 33 BLUE OAK LN  
City-St-Zip: PALM COAST, FL 32137

Title: TD  
Name: MANNO, EUGENE  
Address: 33 KING FISHER LANE  
City-St-Zip: PALM COAST, FL 32137

Title: D  
Name: DAMSTRA, FRANKLIN  
Address: 32 BRISTOL DR  
City-St-Zip: PALM COAST, FL 32137

I hereby 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 all other like empowered.

SIGNATURE: EUGENE MANNO

TD

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date