

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

FILED
Feb 08, 2006 8:00 am
Secretary of State

02-08-2006 90012 042 ****61.25

DOCUMENT # N18624

1. Entity Name

THE 466TH BOMB GROUP ASSOCIATION, INC.



Principal Place of Business

8136 COZYCROFT AVENUE
CANOGA PARK CA 91306-1712

Mailing Address

8136 COZYCROFT AVENUE
CANOGA PARK CA 91306-1712



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

65-0028511

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

D'LUGOS, DONALD A.
216 DOLPHIN STREET
GULF BREEZE FL 32561

7. Name and Address of New Registered Agent

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 STD ☐ Delete
NAME MAIDEN, ELMOE
STREET ADDRESS 8136- COZYCROFT AVE.
CITY- ST- ZIP CANOGA PARK CA 91306-1712

TITLE VPD ☐ Delete
NAME CAMPBELL, WILLIAM
STREET ADDRESS 421 WILSON ST.
CITY- ST- ZIP CLINTON MA 01510-4235

TITLE D ☒ Delete
NAME GERRITY, JOHN W
STREET ADDRESS 6606 PEBBLE BEACH DR
CITY- ST- ZIP HOUSTON TX 77069-2405

TITLE D ☐ Delete
NAME LYNN, RALPH
STREET ADDRESS 191 ONEIDA AVE. NW
CITY- ST- ZIP CANTON OH 44708-5726

TITLE D ☐ Delete
NAME LOEVSKY, LOUIS
STREET ADDRESS 16 HAMILTON DR. EAST N.
CITY- ST- ZIP CALDWELL NJ 07006-4626

TITLE D ☐ Delete
NAME HORAN, JOHN J
STREET ADDRESS 28148 W BIG HOLLOW RD.
CITY- ST- ZIP INGLESIDE IL 60041-9457

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Change ☒ Addition
NAME BAYNES, RICHARD C.
STREET ADDRESS 19191 HARVARD AVE #234
CITY- ST- ZIP IRVINE, CA 92612-4648

TITLE D ☐ Change ☒ Addition
NAME BRIDGERS, DAVID I.
STREET ADDRESS 605 LONGVIEW ST.
CITY- ST- ZIP VICKSBURG, MS, 39180-6026

TITLE D ☐ Change ☒ Addition
NAME MCNAIR, RUSSELL D.
STREET ADDRESS 26 DORSET DR.
CITY- ST- ZIP KENILWORTH, NJ, 07033-1417

TITLE D ☐ Change ☒ Addition
NAME CHRIS BRASSFIELD
STREET ADDRESS 307 NEWCASTLE LANE
CITY- ST- ZIP WINCHESTER, KY 50391-2944

TITLE D ☐ Change ☒ Addition
NAME LESLIE SHARROCK
STREET ADDRESS 1251 SEITZ DR.
CITY- ST- ZIP WAUKESHA, WI, 53186-6745

TITLE D ☐ Change ☒ Addition
NAME EARL E. WASSON
STREET ADDRESS 548 BRENTMOOR AVE.
CITY- ST- ZIP BOWLING GREEN, KY, 42101-3712

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:

Elmo E. Maiden
ELMO E. MAIDEN
Treasurer

1/25/06 (818) 344-6943