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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Secretary of State **DIVISION OF CORPORATIONS**

Mar 01, 1999 8:00 am Secretary of State Katherine Harris

03-01-1999 90022 039 ****61.25

FILED

 OCUMENT Corporation Name	# N	1955	2	
NASA KENNEDY	SPACE	CENTER	MANAGEMENT	ASSOCIATION

, INC.

Principal Place of Business

Mailing Address

CITY-ST-ZIP KSC FL 32899 TITLE P	P. O. BOX 21 KSC FL 3281		P. O. BOX 21064 KSC FL 32815			
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Zip Country Zip Country	City & Sta	te	City & State			\$8.75 Additional
BRYANT, KATHY MASA JOHN F KENNEDY SPACE CENTER MAIL CODE: GG-8-B KENNEDY SPACE CENTER FL 32899 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation aubmits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the policipation of 517.0503. Priorida Statutes. The above-named corporation aubmits this statement for the purpose of changing its registered agent. I am familiar with, and accept the policipation of Section 617.0503. Priorida Statutes. The above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the policipation of Section 617.0503. Priorida Statutes. SIGNATURE 12. DEFECTIONS Signature, Source of primed registered florer signature. (NOTE: Registered Agent Signature required signature requi	Zip		Zip			\$5.00 May Be
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accorping the appointment as registered agent, are familiar, with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature 12. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 12. NAME MONTGOMERY, ANN 12. NAME MAIL CODE: 10 MONTGOMERY, ANN 12. NAME MAIL CODE: 10 MAIL CODE: PZ MAIL CODE: PZ MAIL CODE: PS MAIL CODE: PF-F MAIL CODE: FF-F MAIL CODE: FF-F MAIL CODE: BD-D MOME MONTGOULEZ, MIGUEL MONTGOMERY, ANN MAIL CODE: BD-D MOME MONTGOULEZ, MIGUEL MAIL CODE: BD-D MOME MONTGOULEZ, MIGUEL MAIL CODE: PF-I MAIL C	MASA JO MAIL COI	HN F KENNEDY SPACE CENTE DE: GG-8-B	R	82 Street Add NASK 83 MS		aceCentr
11. Pursuant to the provisions of Sections 617 (502) and 617,1508, Florida Statutes, the above-named corporation submitted the statement for the purpose of changing its registered and office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 617 (503, Florida Statutes. SIGNATURE SIGNATU	KLINILD	OF ACE CENTENTE SECSO		84 City	and usaxalable	85 Zio Code
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: