


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008 08:00 A
Secretary of State

DOCUMENT # N28113	
1. Entity Name WORLD WAR II FLIGHT NURSES ASSOCIATION INC.	

Principal Place of Business 1600 TAMARAC TAVARES, FL 32778	Mailing Address 1600 TAMARAC TRAIL TAVARES, FL 32778
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DO NOT WRITE IN THIS SPACE



01222008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2917852	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ERRAIR, DOROTHY
1600 TAMARAC TRAIL
TAVARES, FL 32778**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when restate) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ERRAIR, DOROTHY C 1600 TAMARAC TRAIL TAVARES, FL 32778
TITLE NAME STREET ADDRESS CITY - ST - ZIP	B BJERKE, VER NELL 412 E 55TH STREET, #3 F NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY - ST - ZIP	B ELAHERTY, AGNES 757 MAIN STREET #5 SOUTH PORTLAND, ME 04106
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP THORP, FRANCES 799 YELLOWSTONE DR., APT 270 VACAVILLE, CA 95687
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T EISENHOWER, GENE TRACHSEL 5620 SW 35 WAY GAINESVILLE, FL 32608
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000822771
02/20/08-80011-006 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Gemma K. Trachsel Eisenhower 2-7-08 352-335-1348
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #