

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N30874

1. Entity Name

HELICOPTER REUNION ALUMNI ASSOCIATION INC.

FILED
Aug 15, 2000 8:00 am
Secretary of State

08-15-2000 90003 031 ****61.25

Principal Place of Business

938 SATSUMA CIRCLE
SWITZERLAND FL 32259
US

Mailing Address

938 SATSUMA CIRCLE
SWITZERLAND FL 32259
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

59-2951555

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

EARL E. HOFFAY
938 SATSUMA CIR.
SWITZERLAND FL 32259

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.

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
After September 13; 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☒ Delete
NAME	HOFFAY, EARL E.	
STREET ADDRESS	938 SATSUMA CIR.	
CITY-ST-ZIP	SWITZERLAND FL 32259	
TITLE	D	☐ Delete
NAME	DANIELS, ROGER T.	
STREET ADDRESS	P.O. BOX 688 N/A	
CITY-ST-ZIP	NEWPORT TN 37821	
TITLE	STD	☐ Delete
NAME	DANIELS, JANET	
STREET ADDRESS	5104 HOLLYCREST DR.	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	STD	☒ Delete
NAME	HOFFAY, BARBARA	
STREET ADDRESS	938 SATSUMA CIR.	
CITY-ST-ZIP	SWITZERLAND FL 32259	
TITLE	VD	☒ Delete
NAME	BELLEMARE, DON	
STREET ADDRESS	6001 STILL RUN DRIVE	
CITY-ST-ZIP	GREENSBORO NC 27455	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	VICE PRESIDENT	☒ Change ☐ Addition
NAME	HOFFAY, EARL E.	
STREET ADDRESS	938 SATSUMA CIR. 16	
CITY-ST-ZIP	SWITZERLAND, FL 32259	
TITLE	DIRECTOR	☐ Change ☐ Addition
NAME	DANIELS, ROBERT	
STREET ADDRESS	P.O. BOX 688	
CITY-ST-ZIP	NEWPORT, TN 37821	
TITLE		☐ Change ☒ Addition
NAME	NO CHANGE	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TREASURER	☒ Change ☐ Addition
NAME	BELLEMARE, DON	
STREET ADDRESS	6001 STILL RUN DRIVE	
CITY-ST-ZIP	GREENSBORO, N.C. 27455	
TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	BELLEMARE, DON	
STREET ADDRESS	6001 STILL RUN DRIVE	
CITY-ST-ZIP	GREENSBORO, NC 27455	
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 exemption stated in Section 119.07(3)(i), 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:

Earl E. Hoffay
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8.8.00

904.630.3945

Date

Daytime Phone #

CR2E037 (5/00)