2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 10, 2008 8:00 am Secretary of State DOCUMENT # N35852 1. Entity Name 03-10-2008 90059 032 ****70 00 CHAPTER 58, THE RETIRED ENLISTED ASSOCIATION, Principal Place of Business Mailing Address P.O. BOX 6676 MACDILL AFB TAMPA FL 33608-0676 **ENLISTED CLUB** MACDILL AFB TAMPA FL 33608-0676 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State Applied For 4. FEI Number 59-2982474 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SHARPE, HERMON JR. Street Address (P.O. Box Number is Not Acceptable) 3305 WÉST BEAUMONT ST. **TAMPA FL 33611** City Zin 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or armed name of registered spect and the discretization (NOTESP-) island Agent signature (and uned when reinstating) CATE FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Due By May 1, 2008 Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PST ☐ Delete TITLE ☐ Change ☐ Addition SHARPE, HERMON 305 WEST BEAUMONT ST STREET ADDRESS STREET ADDRESS TAMPA FL 33611-0780 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition ATWOOD, HAROLD NAME NAME 4722 OHIO AVE STREET ADDRESS STREET ADDRESS **TAMPA FL 33616** City-St-ZIP CHTY-ST-ZIP ☐ Delete TITLE ☐ Change TITLE Addition MARZE PARKER, GEOFFREY NAME 1104 TANNER RD STREET ADDRESS STREET ADDRESS PLANT CITY FL 33567-8047 CITY-ST-ZIP CITY-ST-ZiP TITLE Delete TITLE Change : neitibbA 🔲 BLACK, LEONARD C NAME NAME STREET ADDRESS 8491 MILLWOOD DR STREET ACCIPESS 17836 Fellowfield Dr. CITY - ST - ZIP TAMPA FL-33615 CITY-ST-ZIP Lutz, FL 33549 ☐ Delete Change ncitibbA 🔲 TITLE IDZIAK, GENE NAME NAME 10843 FIRST STREET STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33716 CITY-ST-ZIP CITY-ST-7/P ☐ Change ☐ Delete TITLE Addition TITLE NAME NAME STHEET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SE-ZIP

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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 outri, 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.

I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Section 119, Florida Statutes. I further certify that the information

Charge Jr. Feb 28, 2008 SIGNATURE: Hermon Sharpe