

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36381

FILED
Apr 22, 2008
Secretary of State

Entity Name: TITUSVILLE AMATEUR RADIO CLUB, INC.

Current Principal Place of Business:

4835 SANTA ROSA AVE
TITUSVILLE, FL 32780

New Principal Place of Business:

Current Mailing Address:

P O BOX 73
TITUSVILLE, FL 32781

New Mailing Address:

FEI Number: 59-2997556 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLTMAN, MICHAEL E
7242 CARILLON AVE
COCOA, FL 32927 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HUGHES, HORACE T
Address: 4835 SANTA ROSA AVE
City-St-Zip: TITUSVILLE, FL 32780

Title: S () Delete
Name: JOHNSON, CATHY
Address: 5085 CLOVER LANE
City-St-Zip: TITUSVILLE, FL 32780

Title: T () Delete
Name: WOLTMAN, MICHAEL E
Address: 7242 CARILLON AVE
City-St-Zip: COCOA, FL 32927

Title: VP () Delete
Name: SPADE, DONALD E
Address: 3855 HICKORY HILL BLVD
City-St-Zip: TITUSVILLE, FL 32780

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SPADE, DONALD
Address: 3855 HICKORY HILL BLVD
City-St-Zip: TITUSVILLE, FL 32780

Title: S (X) Change () Addition
Name: PARKER, DIANE
Address: PO BOX 393
City-St-Zip: MIMS, FL 32754

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: PARKER, ED
Address: PO BOX 393
City-St-Zip: MIMS, FL 32754

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL E. WOLTMAN

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04/22/2008

Electronic Signature of Signing Officer or Director

_____ Date