SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

MC CARTHY, PIERCE

3187 BEACH WINDS CT

MELBOURNE BEACH FL

8531 SE-FEDERAL-HWY, #C-106

2150 ATLANTIC AVE, UNIT 414

MCCARTHY, BOBERT

SPUART FL

Lester, Bell



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary o State

DIVISION OF CORPORATIONS

DOCUMENT # N39265

(6)

SPACE COAST ALL AIRBORNE CHAPTER, 82ND AIRBORNE DIVISION ASSOCIATION, INC.					
Principal Place of Business Mailing Address				1 INDICION DOD FIFEE IDIID CIRIN DIGIT N	III BIBII BIBII BIBII BIBII BIBII BIBII IBBI
% NORMAN HO	DOES TREASURER	Space Coast All Abn:	Assoc. Saac		
122 NORTH MEDITTERANEAN AVENUE				DO NOT WRITE IN THIS SPACE	
iport st. Lucie Ius	Ft, 34952	Pt. St. Lucie, FL 3		3. Date incorporated or Qualified	3a. Date of Last Report
				07/23/1990	02/27/1996
2. Principal Place of Business 24. Mailing Address			4. FEI Number	Applied For	
21 26			59-2896310	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. # eta AV		,	5. Certificate of Status Desired	\$8.75 Additional	
22		27 07		8. Objiniozio di dialas positos	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23	Country	28	Country	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pai	- ' - ' I
24	25 9 Name and Address of Currel	29 30	0)	Personal Property Tax due June 10. Name and Address of New Reg	
81 Name					
				IERCE MECARTI	
STONE			Street Address (P.O. Box Number is Not Acceptable)		
96 AOUA NA DRIVE			63	3107 DEADINOOR	SCOURT
JENSEN BEACH FE 34057				ELBOURNE. FL	
			84 Ph: #61	aca enta	FL 85 35951
44 Purguant	to the provisions of Spatians 617 050	22 and £17 1509. Elorida Statutos	the phone pamed core	952-8783	rrace of changing its registered
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 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 617.0503, Florida Statutes.					
71 ~	m tamiliar with, and accept the oblig	ations of, Section 617.0503, Florid	pa Statutes.	-11 .	9/2/97
SIGNATURE .	FIELCE MCARTHY Signature, typed or printed name of registered ag	ect and title if applicable (NOTE: 6	CUCLE W CUC Registered Agent signature regulr	and when reinstalling)	/////
12. OFFICERS AND DIRECTORS			13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	ADDITIONO/OFFWHALE TO CITTO	Change Addition
NAME	TIMBLIN, GLORIA J		1.2 NAME		
STREET ADDRESS	1775-76TH TER. SW #4		1.3 STREET ADDRESS		·
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY+ST-ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	GALLARDO, ROBERT LTC	,	2.2 NAME		
STREET ADDRESS	209 MANATEE COURT		2.3 STREET ADDRESS		
CITY-ST-ZIP	BAREFOOT BAY FL 32976		2. 4 City-St-ZiP		
TITLE	DS	☐ DELETE	3.1 TITLE		Change Addition
NAME	HODGES, NORMAN		3.2 NAME		
STREET ADDRESS	122 MEDITERREAN AVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	PT. ST. LUCIE FL		3.4. CITY-ST-ZIP		
TITLE	DVP	DELETE	4.1 TITLE		☐ Change ☐ Addition

6.4 CITY-ST-ZIP

MELBOURNE BEACH FL 32951

14. I do 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 18 or Block 18

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

☐ DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

Aug 18

51.18011 mm

☐ Change

Change

Addition

Addition

FILED

Sep 17 1997 8:00am

Secretary of State