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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 27, 1999 8:00 am  
Secretary of State

02-27-1999 90065 021 \*\*\*\*70.00

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DOCUMENT # N40582

1. Corporation Name

1876TH ENGINEER AVIATION BATTALION REUNION ASSOC  
IATION, INC.

Principal Place of Business

167 FLAMINGO RD  
EDGEWATER FL 32141-7206  
US

Mailing Address

167 FLAMINGO RD  
EDGEWATER FL 32141-7206  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

10/29/1990

4. FEI Number

65-0228770

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing



\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

D'AIELLO, FRANK J  
167 FLAMINGO RD  
EDGEWATER FL 32141

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME SHIMP, NATHAN B  
STREET ADDRESS RT. #3, BOX 91F  
CITY-ST-ZIP PALMYRA MO 63961

TITLE VD ☒ DELETE

NAME WILSON, CHARLES H  
STREET ADDRESS 9131 E. 85TH STREET  
CITY-ST-ZIP TULSA OK 74137

TITLE TD ☐ DELETE

NAME SEISER, ORVILLE H  
STREET ADDRESS 702 S. MERIDIAN DRIVE, SPACE 328  
CITY-ST-ZIP APACHE JUNCTION AZ 85220

TITLE SD ☐ DELETE

NAME MOSIER, NONIE  
STREET ADDRESS RT. #3, BOX 365  
CITY-ST-ZIP GEORGETOWN IN 47122

TITLE D ☐ DELETE

NAME MINER, JOHN E  
STREET ADDRESS 3804 WYNDSONG TRAIL  
CITY-ST-ZIP LEXINGTON KY 40514

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME CLETIS KILLIAN  
1.3 STREET ADDRESS RTE #1, Box 50  
1.4 CITY-ST-ZIP SAYERS, OK 73662

2.1 TITLE VD ☒ Change ☐ Addition

2.2 NAME RICHARD GEE  
2.3 STREET ADDRESS 12603 Gablet Dr.  
2.4 CITY-ST-ZIP LA MIRADA, CA 90638

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/1999

(606)  
223-2043

Daytime Phone #

CR2E037 (11/98)