

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N40582

1. Entity Name

1876TH ENGINEER AVIATION BATALLION REUNION ASSOC

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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0228770

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

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

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

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  
NAME CLETIS, KILLIAN  
STREET ADDRESS RT 1 BOX 50  
CITY-ST-ZIP SAYERS OK 73662 ☒ Delete

TITLE VD  
NAME GEE, RICHARD  
STREET ADDRESS 12603 GABBETT DR  
CITY-ST-ZIP LA MIRADA CA 90638 ☒ Delete

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

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

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE PRESIDENT  
NAME RICHARD GEE  
STREET ADDRESS 12603 S. GABBETT DR.  
CITY-ST-ZIP LA MIRADA, CA 90638-2107 ☒ Change ☐ Addition

TITLE V.P.  
NAME THORVOLD J. ANDERSEN  
STREET ADDRESS P.O. BOX 5266 WSB  
CITY-ST-ZIP GAINSVILLE, GA 30504 ☒ Change ☐ Addition

TITLE TD  
NAME EDNA QUISENBERRY  
STREET ADDRESS 5804 LAKESIDE TRAIL  
CITY-ST-ZIP AUSTIN, TX 78734 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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:

*John E. Miner*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/2001

859-223-2643

Date

Daytime Phone #

CR2E037 (10/00)

0009461