

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43818

FILED
Apr 07, 2009
Secretary of State

Entity Name: FLAGLER -PALM COAST AMATEUR RADIO CLUB INC.

Current Principal Place of Business:

1200 E. MOODY BLVD
EOC BUILDING
BUNNELL, FL 32110 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 353282 N/A
PALM COAST, FL 32135 US

New Mailing Address:

P.O. BOX 353698 N/A
PALM COAST, FL 32135 US

FEI Number: 59-3004188

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IPOLYI, GEORGE
6 MONTAUK COURT
PALM COAST, FL 32164 US

Name and Address of New Registered Agent:

NELSON, RUSSELL D
32 WHISPERING PINE DR.
PALM COAST, FL 32164 US

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: RUSSELL NELSON

04/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WOIKA, JOHN
Address: 34 SOUTHLAKE DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: DV () Delete
Name: SANITA, FRANCIS
Address: 8 EAGLE PLACE
City-St-Zip: PALM COAST, FL 32164

Title: DS () Delete
Name: RUSSELL, NELSON
Address: 32 WHISPERING DRIVE
City-St-Zip: PALM COAST, FL 32164

Title: DT (X) Delete
Name: IPOLYI, GEORGE
Address: 6 MONTAUK COURT
City-St-Zip: PALM COAST, FL 32164

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WOIKA, JOHN
Address: 34 SOUTHLAKE DRIVE
City-St-Zip: PALM COAST, FL 32137

Title: VP (X) Change () Addition
Name: SANITA, FRANCIS
Address: 8 EAGLE PLACE
City-St-Zip: PALM COAST, FL 32164

Title: ST (X) Change () Addition
Name: RUSSELL, NELSON
Address: 32 WHISPERING DRIVE
City-St-Zip: PALM COAST, FL 32164

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

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: RUSSELL NELSON

ST

04/07/2009

Electronic Signature of Signing Officer or Director

Date