

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90045 015 ****61.25

DOCUMENT # N49046

1. Entity Name

~~NIMROD AIRCRAFT MUSEUM, INC.~~
SHADOW AVIATION MUSEUM, INC



Principal Place of Business

22296 NW 75 AVE RD
MICANOPY FL 32667
US

Mailing Address

22296 NW 75 AVE RD
MICANOPY FL 32667
US

54027886



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3125872

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SILBERMAN, JOHN
22296 NW 75TH AVE. RD.
MICANOPY FL 32667

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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME SILBERMAN, JOHN ☐ Delete
STREET ADDRESS 22296 NW 75TH AVE. RD.
CITY-ST-ZIP MICANOPY FL 32667

TITLE VD
NAME SILBERMAN, SUSAN ☐ Delete
STREET ADDRESS 22296 NW 75TH AVE. RD.
CITY-ST-ZIP MICANOPY FL 32667

TITLE D
NAME GANDY, STACY ☐ Delete
STREET ADDRESS 24265 MONDON HILL RD
CITY-ST-ZIP BROOKSVILLE FL 34601

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

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 Silberman

JOHN SILBERMAN

3-24-04

352-591-2993

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

524027886

ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF
NIMROD AIRCRAFT MUSEUM, INC.

Attachment

DOCUMENT NUMBER N49046

Pursuant to the provisions of Section 617.1006, Florida Statutes, this Florida Not-For-Profit corporation adopts the following Articles of Amendment to its Articles of Incorporation:

First: Effective March 29th, 2004, the name of the corporation shall be:
SHADOW AVIATION MUSEUM, INC.

Second: The Amendment was approved by the members on March 29th, 2004. The number of votes cast for the Amendment was sufficient for approval.

Signed this 29th day of March, 2004.

Signature

John Silberman
John Silberman
President