NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

EIGHTH AVE

DOCUMENT # N49992

1. Corporation Name

SPACE COAST THUNDERBIRD CLUB, INC.

AVE

Principal Place of Business 496 PETAL ROAD NE PALM BAY FL 32907-2345

2. Principal Place of Business

21 319 EIGHTH

Mailing Address

496 PETAL ROAD NE PALM BAY FL 32907-2345

2a. Mailing Address

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FILED Mar 10, 1999 8:00 am § Secretary of State

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	E 18118 137 B.B. 1781	

3. Date Incorporated or Qualifed

07/20/1992

Suite, Apt. #, etc.	Suite, Apt. #, etc.		4. FEI Number	Appl	ied For
22	27		59-3125080	Not.	Applicable
City & State 23 /NOIALANTIC FL	City & State 28 /ND/ALANTIC	FL	5. Certifcate of Status Desired	\$8.75 Ad Fee Req	
Zip Country 24 32903 25 USA	Zip 3 2 9 0 3 30	Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 M	- 1
9. Name and Address of Current	1		10. Name and Address of New Registered		
o. Italia and Address of Surface	TOBIOLOGO PABOLA	81 Name			
			LELL STEWART		
WARD, ED	82 Street	Street Address (P.O. Box Number is Not Acceptable)			
496 PETAL ROAD NE		83	17 17611111 1112		
PALM BAY FL 32907					
		84 City	PIALANTIL FL		903
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 oration's board of directors. I hereby accept the appoir	changing its real	egistered (
agent. I am familiar with, and accept the obligation	ns of, Section 617.0503, Florida	Statutes.	COLOR S DOLLO OF CHICAGO A THOUGH A COCOPT WIS APPOIN		
			(Kell Stewar 3	-3-59	7_
SIGNATURE CLELL STEWAR Signature, typed or printed name of registered agent a					0 10 40
12. OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN		
TITLE VP	☐ DELETE	1.1 TITLE	,	☐ Change	Addition
NAME WATTS, EILEEN		1.2 NAME		,	j
STREET ADDRESS 1 OCEAN WEST BLVD #9A4	•	1.3 STREET ADDRESS	• • • • • • • • • • • • • • • • • • •	•	
CITY-ST-ZIP DAYTONA BEACH SHORES FL		1.4 C/TY-ST-ZP	- 32118	<u> </u>	
TITLE BOD	DELETE	2.1 TITLE	BOD	Change	Addition
NAME STEWART, CLELL		2.2 NAME	MOORCROFT PATRICIA	,	·
STREET ADDRESS 319 8TH AVE		2.3 STREET ADDRESS	MOORCROFT, PATRICIA 606 QUEENSBRIDGE DR		
CITY-ST-ZIP INDIALANTIC FL		2. 4 CITY-ST-ZIP	LAKE MARY, FL- 32746		
TITLE BOD	⊠ .DELETE	3.1 TITLE	<i>ይ</i> ለD	Change	Addition
NAME STEWART, ANN		3.2 NAME	SMITH, STEVE		
STREET ADDRESS 319 8TH AVE		3.3 STREET ADDRESS	OUT CANAL ST.		,
CITY-ST-ZIP INDIALANTIC FL		34, CITY-ST-ZIP	DOD 32926	100	
TITLE BOD	DELETE	4.1 TITLE	DOD	Change	☐ Addition
NAME VOLZ, CHARLES	•	4. 2 NAME	LATE DALL		·
STREET ADDRESS 8 AVALON TERRACE		4.3 STREET ADDRESS	LAREAN LICKT BIND 4 YAY	L	
CITY-ST-ZIP PALM COAST FL		4.4 C/TY-ST-ZIP	DAYTONA BEACH SHORES	er 35	118
TITLE ST	DELETE	5.1 TITLE	ST	Change	☐ Addition
NAME WARD, ED	•	5.2 NAME	STEWART, CLELL		
STREET ADDRESS 2500 TEMPLE STREET, NE		5.3 STREET ADDRESS			ļ
CITY-ST-ZIP PALM BAY FL		5.4 CITY-ST-ZIP	INDIALANTIC, FL 329	<u> 23</u>	
TITLE P	☐ DELETE	6.1 TITLE		Change	Addition
NAME SKOV, IRV		6.2 NAME			
STREET ADDRESS 937 BUFORD ST. NE		6.3 STREET ADDRESS			
CITY-ST-ZIP PALM BAY FL		6.4 CITY-STEZIP	- 32907		
14. I hereby certify that the information supplied with	this filing does not qualify for the	e exemption stated	in Section 119.07(3)(i), Florida Statutes. I further cen	ify that the inf	formation

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.

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