

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000044

FILED
Mar 06, 2009
Secretary of State

Entity Name: DELAND NAVAL AIR STATION MUSEUM, INC.

Current Principal Place of Business:

910 BISCAYNE BLVD
DELAND, FL 32724 US

New Principal Place of Business:

Current Mailing Address:

910 BISCAYNE BLVD
DELAND, FL 32724 US

New Mailing Address:

FEI Number: 59-3227793

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARSON, E. P
395 ORANGE ST
DELAND, FL 32724 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TS () Delete
Name: FORTES, JACK
Address: 255 N HILL AVE
City-St-Zip: DELAND, FL 32724

Title: VP () Delete
Name: LANCASTER, C. A
Address: 711 N. GARFIELD AVE
City-St-Zip: DELAND, FL 32724

Title: P () Delete
Name: LOWENSTEIN, PETER C
Address: 214 E. WASHINGTON AVE
City-St-Zip: DELAND, FL 32724

Title: T () Delete
Name: CARSON, E. P
Address: 395 ORANGE ST
City-St-Zip: DELAND, FL 32724

Title: D (X) Delete
Name: STUBBS, CHRISTOPHER B
Address: 4029 W STATE RD 46
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: MAKRIS, GREGORY
Address: 1110 STILLWATER DR.
City-St-Zip: DELAND, FL 32720

Title: P (X) Change () Addition
Name: LOWENSTEIN, PETER C
Address: 214 E. WASHINGTON AVE
City-St-Zip: DELAND, FL 32724

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

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: PETER C. LOWENSTEIN

PRES

03/06/2009

Electronic Signature of Signing Officer or Director

Date