

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000114

FILED  
Jan 19, 2009  
Secretary of State

Entity Name: U.S. SPACE WALK OF FAME FOUNDATION, INC.

**Current Principal Place of Business:**

4 MAIN ST  
TITUSVILLE, FL 32780

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 6385  
TITUSVILLE, FL 32782 63

**New Mailing Address:**

P. O. BOX 1989  
TITUSVILLE, FL 32781

FEI Number: 59-3267408

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BURDINE, T  
410 INDIAN RIVER AVE.  
TITUSVILLE, FL 32780 US

**Name and Address of New Registered Agent:**

BURDINE, T  
7351 OFFICE PARK PL, SUITE A  
MELBOURNE, FL 32940 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:

01/19/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: EVANS, JOHN H ESQ.  
Address: 750 COUNTRY CLUB DR.  
City-St-Zip: TITUSVILLE, FL 32780

Title: T ( ) Delete  
Name: MIKEL, ARLENE  
Address: 2157 KINGS CROSS  
City-St-Zip: TITUSVILLE, FL 32796

Title: P ( ) Delete  
Name: MARS, CHARLIE  
Address: 3970 PINETOP DR.  
City-St-Zip: TITUSVILLE, FL 32796

Title: VPD ( ) Delete  
Name: ARNOLD, BOB  
Address: 4290 PONDAPPLE DR.  
City-St-Zip: TITUSVILLE, FL 32796

Title: CPA ( ) Delete  
Name: BURDINE, T  
Address: 410 INDIAN RIVER AVE.  
City-St-Zip: TITUSVILLE, FL 32996

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: L (X) Change ( ) Addition  
Name: EVANS, JOHN H ESQ  
Address: 1702 S. WASHINGTON AVE  
City-St-Zip: TITUSVILLE, FL 32780

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

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

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

Title: CPA (X) Change ( ) Addition  
Name: BURDINE, T  
Address: 7351 OFFICE PARK PL. SUITE A  
City-St-Zip: MELBOURNE, FL 32940

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: CHARLES B. MARS

P

01/19/2009

Electronic Signature of Signing Officer or Director

Date