FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996 ·

DOCUMENT #
1. Corporation Name

Principal Place of Business

STREET ADDRESS

CITY - ST - ZIP

N95000001911 (5)

Mailing Address

ORDER OF THE HONORABLE ARTILLERY COMPANY INC.

545 GARFIELD AVE 545 GARFIELD AVE LAS PALMAS #602 LAS PALMAS #602 **COCOA BEACH FL 32931-4094** COCOA BEACH FL 32931-4094 3. Date Incorporated or Qualified 3a. Date of Last Report 4/18/95 04/18/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 <u>59-3310985</u> 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required Crty & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zιρ Country Zio Country 8. This corporation has liability for intangible tax under s. 199.032, 24 29 30 Florida Statutes ☐ Yes XNo 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SCHEMPP GEORGE SCHEMPP, GEORGE C Street Address (P.O. Box Number Is Not Accepta 62 228 SAN PAULO CIR W 83 MELBOURNE FL 32904 City WEST 84 Zip Code 3290 4 MELBOURNEFI 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 changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and life if applicable (NOTE Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS (12/95) 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CLACITORN CHAS E DOELETE TITLE 1.1 TITLE ☐ Addition Change Change NAME 345 GARFIELD AVE # 602 1.2 NAME CR2E037 STREET ADDRESS 1.3 STREET ADDRESS COCON BEACH, FL. 37931 CITY - ST - ZIP 1.4 CITY-ST-ZIP VP - T- P DELETE TITLE 2.1 TITLE Change Addition NAME SCHEMPP GEORGE C 238 3AN PAULO CIR WEST MELBOURNE, FL 2.2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-Z-P 2. 4 CITY-ST-ZIP TITLE 3 1 TITLE Change ■ Addition NAME INEWELL KELLOGG, JR 32 NAME 3929 OLD HWY, 37-UNIT 93 LAKELAND, FL 338/3 STREET ADDRESS 33 STREET ADDRESS CITY - ST - ZIP 3 4. CITY-ST-ZIP THILE 4.1 TITLE Change Addition COL RICHARD IRVIN, JR 900001728539 -02/29/96--01100--003 NAME 4. 2 NAME 398 MCNABB PRWY COCON BEACH, FL-32931 STREET ADDRESS 4.3 STREET ADDRESS ***61.25 CITY-ST-ZIP 4.4 City-St-ZiP TITLE 5.1 TITLE Change ■ Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY - S1 - ZIP 5.4 CITY-ST-ZIP TITLE DELETE 61 TITLE ☐ Change ☐ Addition NAME 62 NAME

6.3 STREET ADDRESS

64 CITY-ST-7IP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information 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.

CIEICLACHORN

APPROVED AND FILED

96 FEB -8 AMII: 47

TALLAHASSEE, FLORIDA	