

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90067 008 ****61.25

DOCUMENT # N97000007197

1. Entity Name

THE NATIONAL MANAGEMENT ASSOCIATION-SPACE GATEWAY SUPPORT CHAPTER, INC.

Principal Place of Business

Mailing Address

**SPACE GATEWAY SUPPORT
BLDG. 1708 CCAFS
KENNEDY SPACE CENTER FL 32899**

**P.O. BOX 21083
KENNEDY SPACE CENTER FL 32815-0083**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3494901

Applied For

Not Applicable

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

**BUTCHKO, MICHAEL J
SGS-6380
BLDG 1708, R&D ANNEX, CCAFS
KENNEDY SPACE CENTER FL 32899**

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.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CD
MARTIN, ROBERT K
8810 ASTRONAUT BLVD STE 145
CAPE CANAVERAL FL 32920**

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
DARWOOD, JOHN
CHS-005
KENNEDY SPACE CENTER FL 32899**

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GUTIERREZ, SAMUEL
SGS-6380, BLVG. 1708 CCAFS
KENNEDY SPACE CENTER FL 32899**

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EVD
RUTHERFORD, THERESA
SGS-6400D, BLDG 1708 CCAFS
KENNEDY SPACE CENTER FL 32899**

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
TONHAUSER, ERNEST G
RPI 178 BLDG M5 0399 RM 1210-A
KENNEDY SPACE CENTER FL 32899**

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
BOLTON, MICHAEL J
WYLE 321
KENNEDY SPACE CENTER FL 32899**

☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b) 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.

William A. Sample

SIGNATURE: Chairman of the Board, National Management Association

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**321-
3/11/02 476-2311**

CR2E037 (9/01)