2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007132

Entity Name: APOLLO ONE MEMORIAL FOUNDATION, INC.

FILED Apr 01, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Cullent Finicipal Flace of Dusiness.	New Fillicipal Flace of Dusiliess

POST OFFICE BOX 115 3098 EAST BEECHER DRIVE

CAPE CANAVERAL, FL 329200115

PALM HARBOR, FL 34683

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 115 P.O. BOX 0115

CAPE CANAVERAL, FL 329200115 CAPE CANAVERAL, FL 329200115 US

FEI Number: 59-3552527 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KENT, BEVERLY 508 JOHNS PASS RD

MADEIRA BEACH, FL 33708 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:

Clashrania Giamahura of Danisharad Awart

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 DS
 (X) Change () Addition

 Name:
 COOPER, KATHERINE
 Name:
 COOPER, KATHERINE

 Address:
 3098 E. BEECHER DR. UNIT E
 Address:
 3098 E. BEECHER DR. UNIT E

 City-St-Zip:
 PALM HARBOR, FL 34683
 City-St-Zip:
 PALM HARBOR, FL 34683

Title: D () Delete Title: DP (X) Change () Addition Name: JOHNSON, JOHN Name: JOHNSON, JOHN

 Name:
 JOHNSON, JOHN

 Address:
 310 NEWFOUND HARBOR DR.

 City-St-Zip:
 MERRITT ISLAND, FL 32953

 Address:
 MERRITT ISLAND, FL 32953

 Name:
 JOHNSON, JOHN

 Address:
 310 NEWFOUND HARBOR DR.

 City-St-Zip:
 MERRITT ISLAND, FL 32953

Title: D () Delete Title: D (X) Change () Addition Name: CHAFFEE MARSHALL, SHERYL Name: CHAFFEE, SHERYL

Address: 135 SEA PARK BLVD Address: 135 SEA PARK BLVD
City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: SATELLITE BEACH, FL 32937

Title: D () Delete Title: DT (X) Change () Addition

Name: KENT, BEVERLY Name: KENT, BEVERLY
Address: 508 JOHNS PASS AVE Address: 508 JOHNS PASS AVE

City-St-Zip: SAINT PETERSBURG, FL 33708 City-St-Zip: SAINT PETERSBURG, FL 33708

Title: D () Delete Title: () Change () Addition

 Name:
 GAGNON, TIM
 Name:

 Address:
 4465 CARLYSLE AVE.
 Address:

 City-St-Zip:
 TITUSVILLE, FL 32780
 City-St-Zip:

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 GRISSOM, LOWELL D

 Address:
 Address:
 17 DUNLEITH COURT

 City-St-Zip:
 City-St-Zip:
 O'FALLON, MO 63366

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: KATHERINE M. COOPER DIR 04/01/2009