2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2010
Secretary of State

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Entity Name: APOLLO ONE MEMORIAL FOUNDATION, INC.

Current Principal Place of Business:

3098 EAST BEECHER DRIVE
E
PALM HARBOR, FL 34683

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 0115
CAPE CANAVERAL, FL 329200115 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

KENT, BEVERLY
508 JOHNS PASS RD
MADEIRA BEACH, FL 33708 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: DS
Name: COOPER, KATHERINE
Address: 3098 E. BEECHER DR. UNIT E
City-St-Zip: PALM HARBOR, FL 34683

Title: DP
Name: JOHNSON, JOHN
Address: 310 NEWFOUND HARBOR DR.
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D
Name: CHAFFEE, SHERYL
Address: 135 SEA PARK BLVD
City-St-Zip: SATELLITE BEACH, FL 32937

Title: DT
Name: KENT, BEVERLY
Address: 508 JOHNS PASS AVE
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: MGRM
Name: GAGNON, TIM
Address: 4465 CARLYSLE AVE.
City-St-Zip: TITUSVILLE, FL 32780

Title: D
Name: GRISSOM, LOWELL D
Address: 17 DUNLEITH COURT
City-St-Zip: O'FALLON, MO 63366

I hereby 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 all other like empowered.

SIGNATURE: KATHERINE COOPER D 03/14/2010

Electronic Signature of Signing Officer or Director — Date