

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 29, 2004 8:00 am
Secretary of State

01-29-2004 90018 009 ****61.25

DOCUMENT # N99000007254

1. Entity Name

U.S. AIRLINE INDUSTRY MUSEUM FOUNDATION, INC.



Principal Place of Business

2 PARKPLACE CT
DOTHAN AL 36301

Mailing Address

2 PARKPLACE CT
DOTHAN AL 36301

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

58-3614541

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

HEISLER, THOMAS E VP
BANK OF JACKSON COUNTY
5381 CLIFF ST
GRACEVILLE FL 32440

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	DT	<input type="checkbox"/> Delete
NAME	BAUMWALD, STANLEY	
STREET ADDRESS	1242 NW 102ND WAY	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	D	<input type="checkbox"/> Delete
NAME	BROWN, LEROY	
STREET ADDRESS	PO BOX 144	
CITY-ST-ZIP	ZELLWOOD FL 32798-0144	
TITLE	DV	<input checked="" type="checkbox"/> Delete
NAME	WENTWORTH, JOHN S	
STREET ADDRESS	15701 WILLO PINES LN	
CITY-ST-ZIP	MONTVERDE FL 34756	
TITLE	D	<input type="checkbox"/> Delete
NAME	MCLAY, DAVID	
STREET ADDRESS	SAFETY HARBOR	
CITY-ST-ZIP	CLEARWATER FL 34695	
TITLE	DS	<input type="checkbox"/> Delete
NAME	HOLLAND, NEAL E	
STREET ADDRESS	3491 PALL MALL DR	
CITY-ST-ZIP	JACKSONVILLE FL 32257	
TITLE	D	<input type="checkbox"/> Delete
NAME	ROUNDY, MAURICE	
STREET ADDRESS	2355 HOTEL RD	
CITY-ST-ZIP	AUBURN ME 04210	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROBERT W. PATTON	
STREET ADDRESS	2 PARKPLACE CT	
CITY-ST-ZIP	DOTHAN, AL 36301-2100	
TITLE	DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, LEROY	
STREET ADDRESS	PO BOX 144	
CITY-ST-ZIP	ZELLWOOD, FL 32798-0144	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROUNDY, MAURICE	
STREET ADDRESS	75 CONSTELLATION DRIVE	
CITY-ST-ZIP	AUBURN, ME 04210	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DEMAREST, WILLIAM	
STREET ADDRESS	11491 NW 51 TERR.	
CITY-ST-ZIP	MIAMI, FL 33178	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FULLER, ESTAN L.	
STREET ADDRESS	904 LAKESHORE DR.	
CITY-ST-ZIP	POLK CITY, FL 33868	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	QUICK, FORREST A.	
STREET ADDRESS	12 STEBBINS DRIVE	
CITY-ST-ZIP	WINTER HAVEN, FL 33884-2725	

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

SIGNATURE:

Robert W. Patton

ROBERT W. PATTON

1-24-2004

334-702-1010

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #