

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007055

Entity Name: MILITARY MUSEUM, INC.

Current Principal Place of Business:

ONE BUNKER AVENUE
GREEN COVE SPRINGS, FL 32043

Current Mailing Address:

ONE BUNKER AVENUE
GREEN COVE SPRINGS, FL 32043

FEI Number: 51-0478522

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

RUSSELL HAVEN OF REST FUNERAL HOME & CEMET
2315 SANDRIDGE ROAD
GREEN COVE SPRINGS, FL 32043 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title OFFICER
Name RODATZ, CHRIS
Address 986 LAKE RIDGE DRIVE
City-State-Zip: ORANGE PARK FL 32005

Title OFFICER
Name CAMPBELL, JERRY
Address 2429 SANDRIDGE ROAD
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title EXECUTIVE DIRECTOR
Name DIAZ, RUBEN
Address 161 MERCUTIO LANE
City-State-Zip: ST AUGUSTINE, FL FL 32092

Title TREASURER
Name MORTIMER, RAMONA
Address 2862 WOODBRIDGE CROSSING COURT
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title OFFICER
Name DEWS, ROBERT
Address 2820 BLACKBERRY AVE
City-State-Zip: MIDDLEBURG FL 32068

Title CURATOR
Name TIMONEY, JERRY
Address 3850 LAUREL ST.
City-State-Zip: ST AUGUSTINE FL 32084

Title VP
Name SCOTT, WILLIAM
Address 2207 ORANGWOOD ST
City-State-Zip: MIDDLEBURG FL 32068

Title PRESIDENT
Name MURPHY, JOHN
Address 866 WARMER RD
City-State-Zip: GREEN COVE SPRINGS FL 32043

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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: JOHN MURPHY

PRESIDENT

01/28/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OFFICER
Name SCOTT, RAYMOND
Address 3073 S DEER AVE.
City-State-Zip: MIDDLEBURG FL 32068

Title OFFICER
Name TENNY, AUTHUR
Address 9703 NW 219TH STREET
City-State-Zip: STARKE FL 32091

Title OFFICER
Name BROWN, DUSTIN
Address 8256 SANLANDO AVE
City-State-Zip: JACKSONVILLE FL 32211