

2017 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 P
Name RODATZ, CHRIS
Address 986 LAKE RIDGE DRIVE
City-State-Zip: ORANGE PARK FL 32005

Title CURATOR
Name STEIGELMAN, HERBERT M II
Address 4259 CHOKEBERRY RD.
City-State-Zip: MIDDLEBURG FL 32068

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

Title VP
Name HENDRY, GAYWARD
Address 577 BRANSCOMB ROAD
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DIRECTOR
Name TURNER, ROBERT
Address 5673 CHUGAH STREET
City-State-Zip: KEYSTONE HEIGHTS FL 32656

Title EXECUTIVE DIRECTOR
Name MAYER, CHRIS
Address 3336 CITATION DRIVE
City-State-Zip: GREEN COVE SPRINGS FL 32043

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

Title DIRECTOR
Name DEWS, ROBERT
Address 901 NORTH ORANGE RIDGE PO BOX 548
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: HERBERT STEIGELMAN

CURATOR

01/07/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MORTIMER, JIM
Address 2862 WOODRIDGE CROSSING COURT
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DIRECTOR
Name BILLY , TUNER
Address 3833 PECK RD
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title DIRECTOR
Name WACHTER, DAKOTA
Address 2307 SILVER OAK COURT
City-State-Zip: FLEMING ISLAND FL 32003

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

Title DIRECTOR
Name VELDMAN, TIM
Address 3495 HOFFMAN ST. APT. E12 PO BOX
132
City-State-Zip: PENNEY FARMS FL 32079

Title DIRECTOR
Name MURPHY, JOHN
Address 160 CYPRESS AVENUE
City-State-Zip: GREEN COVE SPRINGS FL 32043