

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**

**Jan 26, 2024**

**Secretary of State**

**6608098123CC**

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 US

**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 DIRECTOR  
Name CAMPBELL, JERRY  
Address 6911 OLD CHURCH RD  
City-State-Zip: FLEMING ISLAND FL 32003

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

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

Title CURATOR  
Name STEIGLEMAN, HERBERT  
Address 4259 CHOKEBERRY RD  
City-State-Zip: MIDDLEBURG FL 32068

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

Title VP  
Name SHALLEY, MATTHEW  
Address 6999 GATORBONE RD  
City-State-Zip: KEYSTONE HEIGHTS FL 32056

Title SECRETARY  
Name REEP, TERESA  
Address 817 LAPOMA WAY  
City-State-Zip: ST. JOHNS FL 32259

Title CEO  
Name MOORE, LANNY  
Address 9035 TROPICAL BLEND CIR  
City-State-Zip: JACKSONVILLE FL 32256

**Continues on page 2**

*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:** LANNY MOORE

**EXECUTIVE DIRECTOR**

**01/26/2024**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

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

Title           DIRECTOR  
Name           STRATTON, JIM  
Address        3172 BLUE HERON DR. N  
City-State-Zip: JACKSONVILLE FL 32223