2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000000513

Entity Name: SPACE COAST HONOR FLIGHT INC.

FILED
Apr 14, 2016
Secretary of State
CC2830311513

Current Principal Place of Business:

800 S RIVERSIDE DR INDIALANTIC, FL 32903

Current Mailing Address:

PO BOX 560975

ROCKLEDGE, FL 32956

FEI Number: 27-4628283 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ENO-MAXNER, TERI 800 S RIVERSIDE DR INDIALANTIC, FL 32903 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 PRESIDENT Title DIRECTO	PRESID	T Title	DIRECTOR
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NameWELSER, WILLIAM IIINameOLSON, SUZANNEAddress3133 CELINA LAAddress7113 HALLECK ST.

City-State-Zip: MELBOURNE FL 32934 City-State-Zip: MELBOURNE FL 32940

Title DIRECTOR Title DIRECTOR

Name OLSON, TIMOTHY A Name CARPENTER, NEWTON I

Address 7113 HALLECK ST. Address 27 FAIRWAY DR

City-State-Zip: MELBOURNE FL 32940 City-State-Zip: COCOA BEACH FL 32931

Title DIRECTOR Title DIRECTOR

NameLAMBERT, MARCIANameWELSER, SUSANAddress8200 ORANGE AVENUEAddress3133 CELINA LANE

City-State-Zip: CAPE CANAVERAL FL 32920 City-State-Zip: MELBOURNE FL 32934

Title DIRECTOR Title TREASURER

Name SEILER, LOUIS Name ENO-MAXNER, TERI

Address 2822 ENGLEWOOD DRIVE Address 800 S. RIVERSIDE DRIVE

City-State-Zip: MELBOURNE FL 32940 City-State-Zip: INDIALANTIC FL 32903

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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: TERI ENO-MAXNER TREASURER 04/14/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name SCALES, DUKE Name TATE, CHRISTINE

Address 400 ARROWHEAD TRAIL Address 1635 BANANA DRIVE

City-State-Zip: VERO BEACH FL 32963 City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR Title DIRECTOR

NameWEILER, PHILIPNameNEDERHOED, JOHNAddress6243 THAMES PLACEAddress425 MERMAID COVECity-State-Zip:VERO BEACH FL 32966City-State-Zip:PATRICK AFB FL 32925

TitleSECRETARYTitleDIRECTORNameFRANKS, LINDANameGLASS, STUARTAddress792 BAYSIDE DR.Address132 MIAMI AVE.

City-State-Zip: CAPE CANAVERAL FL 32920 City-State-Zip: INDIALANTIC FL 32903

Title DIRECTOR Title DIRECTOR

NameESTERLINE, JACQUIENameDIZEFALO, RAYMONDAddress1881 LAMEQUE ST. NWAddress109 LA COSTA ST. #508

City-State-Zip: PALM BAY FL 32907 City-State-Zip: MELBOURNE BEACH FL 32951

Title DIRECTOR Title DIRECTOR

Name BREYER, SHEILA Name IRELAND, VICTORIA

Address 178 MARTESIA WAY Address 5781 HERONS LANDING DR.

City-State-Zip: INDIAN HARBOUR BEACH FL 32937 City-State-Zip: VIERA FL 32955