2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2013
Secretary of State
CC0004279657

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Entity Name: SPACE COAST HONOR FLIGHT INC.

Current Principal Place of Business:

6318 DEPOT AVENUE
PORT ST. JOHN, FL 32927

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:

HARRINGTON, KATERI H
6318 DEPOT AVENUE
PORT ST. JOHN, FL 32927 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
Name	WELSER, WILLIAM III
Address	3133 CELINA LA
City-State-Zip:	MELBOURNE FL 32934

Title	DIRECTOR
Name	OLSON, TIMOTHY A
Address	4148 ROLLING HILL DRIVE
City-State-Zip:	TITUSVILLE FL 32796

Title	SECRETARY
Name	HARRINGTON, KATERI
Address	6318 DEPOT AVE
City-State-Zip:	PORT ST. JOHN FL 32927

Title	DIRECTOR
Name	PALMER, SHERRY
Address	1110 PARK SIDE PLACE
City-State-Zip:	INDIAN HARBOR BEACH FL 32937

Title	DIRECTOR
Name	OLSON, SUZANNE
Address	4148 ROLLING HILL DRIVE
City-State-Zip:	TITUSVILLE FL 32796

Title	DIRECTOR
Name	CARPENTER, NEWTON I
Address	27 FAIRWAY DR
City-State-Zip:	COCOA BEACH FL 32931

Title	TREASURER
Name	MAXNER, JAMES
Address	800 S. RIVERSIDE DRIVE
City-State-Zip:	INDIALANTIC FL 32903

Title	OTHER
Name	LAMBERT, MARCIA
Address	8200 ORANGE AVENUE
City-State-Zip:	CAPE CANAVERAL FL 32920

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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: KATERI H HARRINGTON SECRETARY 01/26/2013

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	OTHER
Name	WELSER, SUSAN
Address	3133 CELINA LANE
City-State-Zip:	MELBOURNE FL 32934

Title	OTHER
Name	WILSON, ALLEN
Address	14032 CHICORA CROSSING BLVD
City-State-Zip:	ORLANDO FL 32828

Title	DIRECTOR
Name	HAYES, DENNIS
Address	3244 HAWTHORNE AVENUE
City-State-Zip:	ROCKLEDGE FL 32955

Title	OTHER
Name	SEILER, LOUIS
Address	2822 ENGLEWOOD DRIVE
City-State-Zip:	MELBOURNE FL 32940

Title	DIRECTOR
Name	SILVERNAIL, PRESTON
Address	298 LANTERNBACK ISLAND DR
City-State-Zip:	SATELLITE BEACH FL 32937

Title	DIRECTOR
Name	ENO-MAXNER, TERI
Address	800 S. RIVERSIDE DRIVE
City-State-Zip:	INDIALANTIC FL 32903