

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709357

FILED  
Apr 06, 2009  
Secretary of State

Entity Name: EXPERIMENTAL AIRCRAFT ASSOCIATION, INC. CHAPTER 74

**Current Principal Place of Business:**

P. O. BOX 140571  
ORLANDO, FL 32814 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 140571  
ORLANDO, FL 32814 US

**New Mailing Address:**

FEI Number: 59-1918173      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KOSAR, ROBERT  
2319 SPRINGS LANDING BLVD  
LONGWOOD, FL 32779 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: WALTERS-PHILLIPS, BARBARA  
Address: 957 PREDMONT OAKS DR  
City-St-Zip: APOPKA, FL 32703

Title: T ( ) Delete  
Name: KOSAR, ROBERT  
Address: 2319 SPRINGS LANDING BLVD  
City-St-Zip: LONGWOOD, FL 32779

Title: S ( ) Delete  
Name: CARVETH, TIM  
Address: 5 WEST SPRUCE ST  
City-St-Zip: ORLANDO, FL 32804

Title: D ( ) Delete  
Name: HOTZ, BRUCE  
Address: 2710 RAEFORD ROAD  
City-St-Zip: ORLANDO, FL 32806

Title: P ( ) Delete  
Name: THOMAS, JIM  
Address: 716 BALM OVAL RD  
City-St-Zip: WINTER PARK, FL 32789

Title: D ( ) Delete  
Name: LUTZ, JERRY  
Address: 747 FRIAR ROAD  
City-St-Zip: WINTER PARK, FL 32792

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT KOSAR

T

04/06/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date