

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734822

FILED  
Apr 14, 2005  
Secretary of State

Entity Name: MID FLORIDA CHAPTER 534, EXPERIMENTAL AIRCRAFT ASSOCIATION, INC.

**Current Principal Place of Business:**

1713 ORKNEY DRIVE  
LEESBURG, FL 34788 US

**New Principal Place of Business:**

**Current Mailing Address:**

1713 ORKNEY DRIVE  
LEESBURG, FL 34788 US

**New Mailing Address:**

FEI Number: 59-2411445      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HARPER, ROGER L  
1713 ORKNEY DRIVE  
LEESBURG, FL 34788 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: PD ( ) Delete  
Name: SCHULZ, WILLIAM  
Address: 6314 HIGHLAND LAKES BLVD.  
City-St-Zip: LEESBURG, FL 34748

Title: SD ( ) Delete  
Name: WEBER, JOHN  
Address: 10349 BAY ST.  
City-St-Zip: LEESBURG, FL 34788

Title: TD ( ) Delete  
Name: HARPER, ROGER L.  
Address: 1713 ORKNEY DRIVE  
City-St-Zip: LEESBURG, FL 34788

Title: VD ( ) Delete  
Name: CANNON, MICHAEL  
Address: 36336 MICRO RACETRACK RD  
City-St-Zip: FRUITLAND PARK, FL 34731

Title: D ( ) Delete  
Name: CONDERMAN, WILLIAM  
Address: 14 CYRESS DR.  
City-St-Zip: EUSTIS, FL 32726

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROGER L. HARPER

TD

04/14/2005

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

\_\_\_\_\_  
Date