

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722935

FILED  
Jan 22, 2007  
Secretary of State

Entity Name: FLORIDA AVIATION TRADES ASSOCIATION, INC.

## Current Principal Place of Business:

4685 LONGBOW DRIVE  
TITUSVILLE, FL 32796

## New Principal Place of Business:

## Current Mailing Address:

4685 LONGBOW DRIVE  
TITUSVILLE, FL 32796

## New Mailing Address:

FEI Number: 65-0032480

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAEBURN, PAULA  
4685 LONGBOW DRIVE  
TITUSVILLE, FL 32796 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: D ( ) Delete  
Name: RAEBURN, PAULA  
Address: 4685 LONGBOW DRIVE  
City-St-Zip: TITUSVILLE, FL 32796

Title: P ( ) Delete  
Name: HUNT, JOHN  
Address: 3256 CAPITAL CIRCLE SW  
City-St-Zip: TALLAHASSEE, FL 32310

Title: D ( ) Delete  
Name: KEN, STACKPOOLE  
Address: 600 S. CLYDE MORRIS BLVD.  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VP ( ) Delete  
Name: SLINGLUFF, MICHAEL  
Address: 4900 US 1 NORTH SUITE 100  
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: D ( ) Delete  
Name: DAVI, KEN  
Address: 900 SOUTH FEDERAL HIGHWAY, SUITE 309  
City-St-Zip: STUART, FL 34994

Title: T ( ) Delete  
Name: MCLEAN, TERI  
Address: 900 SOUTH FEDERAL HIGHWAY, SUITE 309  
City-St-Zip: STUART, FL 34994

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition  
Name: SLINGLUFF, MICHAEL  
Address: 4900 US 1 NOERH  
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: VP (X) Change ( ) Addition  
Name: ALLEN, DAVID  
Address: 4215 LINDY CIRCLE  
City-St-Zip: ORLANDO, FL 32827

Title: D (X) Change ( ) Addition  
Name: GRANT, ROBERT  
Address: S-1500 PERIMETER ROAD  
City-St-Zip: WEST PALM BEACH, FL 33406

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 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: PAULA J RAEBURN

D

01/22/2007

Electronic Signature of Signing Officer or Director

Date