2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722935

FILED Jan 14, 2009 Secretary of State

Entity Name: FLORIDA AVIATION TRADES ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 4685 LONGBOW DRIVE TITUSVILLE, FL 32796 **Current Mailing Address: New Mailing Address:** 4685 LONGBOW DRIVE TITUSVILLE, FL 32796 FEI Number: 65-0032480 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RAEBURN, PAULA 4685 LONGBOW DRIVE TITUSVILLE, FL 32796 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition RAEBURN, PAULA Name: Name: 4685 LONGBOW DRIVE Address: Address: City-St-Zip: TITUSVILLE, FL 32796 City-St-Zip: Title: Title: () Delete (X) Change () Addition SLINGLUFF, MICHAEL Name: ALLEN, DAVID Name: Address: 4900 US 1 NORTH Address: 4215 LINDY CIRCLE City-St-Zip: ST. AUGUSTINE, FL 32095 City-St-Zip: ORLANDO, FL 32827 Title: () Delete Title: VΡ (X) Change () Addition ALLEN, DAVID HUNT, JONI Name: Name: 4215 LINDY CIRCLE Address: Address: 600 CLYDE MORRIS BLVD. City-St-Zip: ORLANDO, FL 32827 City-St-Zip: DAYTONA BEACH, FL 32117 Title: () Delete Title: (X) Change () Addition Name: GRANT, ROBERT Name: GRANT, ROBERT S-1500 PERIMETER ROAD S-1500 PERIMETER ROAD Address: Address: City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: WEST PALM BEACH, FL 33406 Title: () Delete Title: (X) Change () Addition BAKER, COLEEN SHOWALTER, SANDY Name: Name: 501 DANLEY DRIVE 400 HERNDON AVE Address: Address: City-St-Zip: FT. MYERS, FL 33907 City-St-Zip: ORLANDO, FL 32803 Title: () Delete Title: (X) Change () Addition HUNT, JONI DYMERSKI, DERIC Name: Name: Address: 600 CLYDE MORRIS BLVD. Address: 825 SEVERN AVE DAYTONA BEACH, FL 32117 TAMPA, FL 33606 City-St-Zip: 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: PAULA RAEBURN D 01/14/2009