

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 712388

**Entity Name:** EXPERIMENTAL AIRCRAFT ASSOCIATION, INC., MANASOTA CHAPTER 180

**FILED**  
**Mar 01, 2017**  
**Secretary of State**  
**CC6074744703**

**Current Principal Place of Business:**

1302 5TH STREET WEST  
PALMETTO, FL 34221

**Current Mailing Address:**

1302 5TH STREET WEST  
PALMETTO, FL 34221 US

**FEI Number: 90-0332235**

**Certificate of Status Desired: No**

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

BASL, LOUIS  
1302 5TH STREET WEST  
PALMETTO, FL 34221 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: LOUIS BASL**

**03/01/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            BASL, LOUIS  
Address        1302 5TH STREET WEST  
City-State-Zip: PALMETTO FL 34221

Title            SECRETARY  
Name            MANDARINO, SHIRLEY  
Address        8031 ST. SIMONS STREET  
City-State-Zip: UNIVERSITY PARK FL 34201

Title            DIRECTOR  
Name            CLARIDGE, JEFF  
Address        8858 WHITE SAGE LOOP  
City-State-Zip: LAKEWOOD RANCH FL 34202

Title            DIRECTOR  
Name            BECKER, SCOTT  
Address        5568 BRIAR CREEK WAY  
City-State-Zip: SARASOTA FL 34235

Title            VP  
Name            STEVENS, GARY D  
Address        7707 19TH AVE. NW  
City-State-Zip: BRADENTON FL 34209

Title            TREASURER  
Name            MAXFIELD, THOMAS  
Address        3812 FISHING TRAIL  
City-State-Zip: SARASOTA FL 34235

Title            DIRECTOR  
Name            MILLER, EDWIN  
Address        2592 JEFFERSON CIR  
City-State-Zip: SARASOTA FL 34239

Title            DIRECTOR  
Name            FAIX, JAMES  
Address        4218 65TH PLACE EAST  
City-State-Zip: SARASOTA FL 34243

*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: LOUIS BASL**

**PRESIDENT**

**03/01/2017**

Electronic Signature of Signing Officer/Director Detail

Date