

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722935

Entity Name: FLORIDA AVIATION BUSINESS ASSOCIATION, INC.**Current Principal Place of Business:**3619 BOBOLINK LANE
ORLANDO, FL 32803**Current Mailing Address:**P.O. BOX 140906
ORLANDO, FL 32814 US**FEI Number:** 65-0032480**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHOWALTER, JENNY
3619 BOBOLINK LANE
ORLANDO, FL 32803 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:** ROBERT H. SHOWALTER

01/27/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name DYMERSKI, DERIC
Address P.O. BOX 140906
City-State-Zip: ORLANDO FL 32814

Title PRESIDENT
Name FRENCH, MICHAEL
Address P.O. BOX 140906
City-State-Zip: ORLANDO FL 32814

Title DIRECTOR
Name ROSE, PAUL
Address P.O. BOX 140906
City-State-Zip: ORLANDO FL 32814

Title DIRECTOR
Name GARGHILL, WILLIAM
Address P.O. BOX 140906
City-State-Zip: ORLANDO FL 32814

Title DIRECTOR
Name COSTABILE, LYNDSSE
Address P.O. BOX 140906
City-State-Zip: ORLANDO FL 32814

Title DIRECTOR
Name SHOWALTER, JENNY
Address P.O. BOX 140906
City-State-Zip: ORLANDO FL 32814

Title DIRECTOR
Name BOTANA, PHIL
Address P.O. BOX 140906
City-State-Zip: ORLANDO FL 32814

Title TREASURER
Name WOODALL, DICK
Address P.O. BOX 140906
City-State-Zip: ORLANDO FL 32814

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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: JENNY SHOWALTER**EXECUTIVE DIRECTOR**

01/27/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WILLIAM , HUDGENS
Address P.O. BOX 140906
City-State-Zip: ORLANDO FL 32814

Title DIRECTOR
Name EARL, WESLEY
Address P.O. BOX 140906
City-State-Zip: ORLANDO FL 32814

Title VP
Name RICHARD, RICHARDS
Address P.O. BOX 140906
City-State-Zip: ORLANDO FL 32814

Title DIRECTOR
Name BUFF, JONATHAN
Address P.O. BOX 140906
City-State-Zip: ORLANDO FL 32814