SIGNATURE:	RICHARD L. RICHARDS			01/10/2017
	Electronic Signature of Registered Agent			Date
Officer/Direc	tor Detail :			
Title	DIRECTOR	Title	PRESIDENT	
Name	QUINN, MIKE	Name	FRENCH, MICHAEL	
Address	P.O. BOX 140906	Address	P.O. BOX 140906	
City-State-Zip:	ORLANDO FL 32814	City-State-Zip:	ORLANDO FL 32814	
Title	DIRECTOR	Title	DIRECTOR	
Name	ROSE, PAUL	Name	GARGHILL, WILLIAM	
Address	P.O. BOX 140906	Address	P.O. BOX 140906	
City-State-Zip:	ORLANDO FL 32814	City-State-Zip:	ORLANDO FL 32814	
Title	DIRECTOR	Title	DIRECTOR	
Name	COSTABILE, LYNDSE	Name	SHOWALTER, JENNY	
Address	P.O. BOX 140906	Address	P.O. BOX 140906	
City-State-Zip:	ORLANDO FL 32814	City-State-Zip:	ORLANDO FL 32814	
Title	DIRECTOR	Title	TREASUERER	
Name	PICKETT, TRISSY	Name	FOLKRINGA, SUE	
Address	P.O. BOX 140906	Address	P.O. BOX 140906	
City-State-Zip:	ORLANDO FL 32814	City-State-Zip:	ORLANDO FL 32814	

Name and Address of Current Registered Agent:

RICHARDS GOLDSTEIN, LLP 55 MIRACLE MILE STE. 310 CORAL GABLES, FL 33134 US

Current Mailing Address:

ORLANDO, FL 32814 US

FEI Number: 65-0032480

DOCUMENT# 722935

3619 BOBOLINK LANE ORLANDO, FL 32803

P.O. BOX 140906

Current Principal Place of Business:

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.

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: FLORIDA AVIATION BUSINESS ASSOCIATION, INC.

Continues on page 2

VP

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: RICHARD L. RICHARDS

Electronic Signature of Signing Officer/Director Detail

FILED Jan 10, 2017 Secretary of State CC7612430595

Certificate of Status Desired: No

01/10/2017 Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	VP
Name	WILLIAM , HUDGENS	Name	RICHARDS, RICHARD L.
Address	P.O. BOX 140906	Address	P.O. BOX 140906
City-State-Zip:	ORLANDO FL 32814	City-State-Zip:	ORLANDO FL 32814
Title	DIRECTOR	Title	DIRECTOR
Name	EARL, WESLEY	Name	BUFF, JONATHAN
Address	P.O. BOX 140906	Address	P.O. BOX 140906
City-State-Zip:	ORLANDO FL 32814	City-State-Zip:	ORLANDO FL 32814
Title	DIRECTOR	Title	SECRETARY
Name	SHOWALTER, JENNY	Name	RICHARDS, RICHARD L.
Address	P.O. BOX 140906	Address	P.O. BOX 140906
City-State-Zip:	ORLANDO FL 32814	City-State-Zip:	ORLANDO FL 32814