

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007283

Entity Name: AEROSPACE CENTER FOR EXCELLENCE, INC.**Current Principal Place of Business:**4175 MEDULLA RD
LAKELAND, FL 33811**Current Mailing Address:**4175 MEDULLA RD
LAKELAND, FL 33811**FEI Number: 59-3679477****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SUN N FUN FLY-IN INC
4175 MEDULLA RD
LAKELAND, FL 33811 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: TRACY T NEAL****05/31/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, SECRETARY
Name PHILLIPS, R. PATRICK
Address 200 N. THORNTON AVENUE
City-State-Zip: ORLANDO FL 32801

Title CHAIRMAN OF THE BOARD
Name GARCIA, RICK
Address 3650 DRANE FIELD ROAD
City-State-Zip: LAKELAND FL 33811

Title VC
Name BEATY, BOB
Address 3211 STONEWATER DRIVE
City-State-Zip: LAKELAND FL 33803

Title TREASURER
Name AHEARN, CHUCK
Address 100 AVIATION DRIVE SOUTH
SUITE 203
City-State-Zip: NAPLES FL 34104

Title CEO, PRESIDENT
Name LEENHOUTS, JOHN
Address 4175 MEDULLA ROAD
City-State-Zip: LAKELAND FL 33811

Title CFO
Name NEAL, TRACY T
Address 4175 MEDULLA RD
City-State-Zip: LAKELAND FL 33811

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: TRACY T NEAL**CFO****05/31/2018**

Electronic Signature of Signing Officer/Director Detail

Date