

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000005825

**Entity Name:** CENTRAL FLORIDA AEROSPACE ACADEMY FOUNDATION, INC**FILED**  
**Feb 07, 2022**  
**Secretary of State**  
**9451360873CC****Current Principal Place of Business:**4075 JAMES C RAY DRIVE  
FLORIDA AIR MUSEUM  
LAKELAND, FL 33811**Current Mailing Address:**4075 JAMES C RAY DRIVE  
FLORIDA AIR MUSEUM  
LAKELAND, FL 33811 US**FEI Number:** 27-0763731**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AEROSPACE CENTER FOR EXCELLENCE INC  
4075 JAMES C RAY DRIVE  
FLORIDA AIR MUSEUM  
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

02/07/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P
Name	GARCIA, RICARDO
Address	3650 DRANE FIELD ROAD
City-State-Zip:	LAKELAND FL 33811

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

Title	T
Name	AHEARN, CHARLES J
Address	1145 DIANA AVE
City-State-Zip:	NAPLES FL 34103

Title	CFO
Name	NEAL, TRACY T
Address	4175 MEDULLA ROAD
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

02/07/2022

Electronic Signature of Signing Officer/Director Detail

Date