## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46444

Entity Name: EXPERIMENTAL AIRCRAFT ASSOCIATION, INCORPORATED

**CHAPTER 977** 

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Mar 16, 2015 Secretary of State CC2792732025

**FILED** 

## **Current Principal Place of Business:**

BRAD ZOELLER 202 SW CHALLENGER LANE LAKE CITY, FL 32025

## **Current Mailing Address:**

DOREEN HOFFMAN 315 SW CHALLENGER LANE LAKE CITY, FL 32025 US

FEI Number: 59-3141366 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ZOELLER, BRAD 202 SW CHALLENGER LANE LAKE CITY, FL 32025 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: BRAD ZOELLER 03/16/2015

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PD Title VD

Name ZOELLER, BRAD Name HANLEY, BRETT

Address 202 SW CHALLENGER LANE Address 1703 SW SISTERS WELCOME RD

City-State-Zip: LAKE CITY FL 32025 #101

City-State-Zip: LAKE CITY FL 32025

Title TD

Title SD Name HOFFMAN, DOREEN

Address 315 SW CHALLENGER LANE Name HOFFMAN, ROBERT

Address 315 SW CHALLENGER LANE
City-State-Zip: LAKE CITY FL 32025

ity-State-Zip: LAKE CITY\_FL 32025 City-State-Zip: LAKE CITY\_FL 32025

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: DOREEN HOFFMAN TREASURER 03/16/2015