2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46444

Entity Name: EXPERIMENTAL AIRCRAFT ASSOCIATION, INCORPORATED

CHAPTER 977

ED

Jan 08, 2017 Secretary of State CC9184717570

FILED

Current Principal Place of Business:

BRAD ZOELLER 202 SW CHALLENGER LANE LAKE CITY, FL 32025

Current Mailing Address:

BRAD ZOELLER 202 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 BRAD ZOELLER 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 01/08/2017

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PD Title VI

NameZOELLER, BRADNameSAWYER, DAVID T VPAddress202 SW CHALLENGER LANEAddress135 SW DUSTY GLENCity-State-Zip:LAKE CITY FL 32025City-State-Zip:LAKE CITY FL 32024

Title TD Title SD

Name SIRES, MARK Name ROSE, SUSAN

Address 166 SW SKYHAWK DRIVE Address 226 SW BAMBI LANE
City-State-Zip: LAKE CITY FL 32025 City-State-Zip: LAKE CITY FL 32025

Title DIRECTOR Title DIRECTOR

Name DECKER, DANIEL Name HOFFMAN, ROBERT

Address 1907 SISTERS WELCOME ROAD Address 315 SW CHALLENGER LANE

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

Title DIRECTOR
Name MARQUIS, GARY

Address 1680 NORTH MAIN STREET

City-State-Zip: BELL FL 32619

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: MARK SIRES TREASURER 01/08/2017