

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N46444

**Entity Name:** EXPERIMENTAL AIRCRAFT ASSOCIATION, INCORPORATED  
CHAPTER 977

**FILED**  
**Jan 31, 2016**  
**Secretary of State**  
**CC9549879637**

**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**

**01/31/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name ZOELLER, BRAD  
Address 202 SW CHALLENGER LANE  
City-State-Zip: LAKE CITY FL 32025

Title VD  
Name SAWYER, DAVID T VP  
Address 135 SW DUSTY GLEN  
City-State-Zip: LAKE CITY FL 32024

Title TD  
Name SIRES, MARK  
Address 166 SW SKYHAWK DRIVE  
City-State-Zip: LAKE CITY FL 32025

Title SD  
Name ROSE, SUSAN  
Address 226 SW BAMBI LANE  
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: BRAD ZOELLER**

**BRAD ZOELLER**

**01/31/2016**

Electronic Signature of Signing Officer/Director Detail

Date